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Fill in this information to identify your case:		
United States Bankruptcy Court for the:  Northern District of: Illinois (State)		
Case number (if known)	Chapter you are filing under:  Chapter 7	
	Chapter 11 Chapter 12 Chapter 13	Check if this is a amended filing

#### Official Form 101

#### Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself		
	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
Your full name  Write the name that is on	Kaila First name	First name
your government-issued picture identification (for example, your driver's	Middle name Fleming	Middle name
license or passport	Last name	Last name
Bring your picture identification to your meeting with the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2. All other names you		
have used in the last	First name	First name
8 years  Include your married or	Middle name	Middle name
maiden names.	Last name	Last name
	First name	First name
	Middle name	Middle name
	Last name	Last name
Only the last 4 digits of your Social	XXX - XX- 1393	xxx - xx
Security number or federal Individual	OR	OR
Taxpayer Identification number (ITIN)	9 xx - xx-	9 xx - xx-

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De	ebtor 1 Kalla First Name	Middle Name Last Name	Case number (if known)
	i ii st ivaine	Wilder Name Last Name	
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer	I have not used any business names or EINs.	I have not used any business names or EINs.
	Identification Numbers (EIN) you have used in the last	Business name	Business name
	8 years	Business name	Business name
	Include trade names and doing business as names	EIN	EIN
		EIN	EIN
5.	Where you live		If Debtor 2 lives at a different address:
		436 W 66th Street Number Street Apt.1W	Number Street
		Chicago Illinois 60621	
		City State Zip Code	City State Zip Code
		Cook County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number Street	Number Street
		City State Zip Code	City State Zip Code
_		City State Zip Gode	Oity State Zip Code
6.	Why you are choosing this district	Check one:	Check one:
	to file for bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		I have another reason. Explain. (See 28 U.S.C. §§ 1408.)	I have another reason. Explain. (See 28 U.S.C. §§ 1408.)
		-	

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De	ebtor 1 Kaila		Fleming	Case number (if kno	own)
	First Name	Middle Name	Last Name		
Pa	Tell the Court Abo	ut Your Bankruptcy Cas	se		
7.	The chapter of the Bankruptcy Code you are choosing to file under		escription of each, see <i>Notice Rec</i> ). Also, go to the top of page 1 an		C. § 342(b) for Individuals Filing for opriate box.
8.	How you will pay the fee	more details about he cashier's check, or m may pay with a credit  I need to pay the fee Individuals to Pay You  I request that my fee judge may, but is not the official poverty lire.	ow you may pay. Typically, if y noney order. If your attorney is t card or check with a pre-print e in installments. If you choose our Filing Fee in Installments (or e be waived (You may request required to, waive your fee, and that applies to your family son, you must fill out the Applies.	rou are paying the submitting your ted address. se this option, sig Official Form 103 t this option only and may do so only size and you are to	the clerk's office in your local court for e fee yourself, you may pay with cash, payment on your behalf, your attorney in and attach the <i>Application for AA</i> ).  If you are filing for Chapter 7. By law, a ly if your income is less than 150% of unable to pay the fee in installments). If the Chapter 7 Filing Fee Waived (Official
9.	Have you filed for bankruptcy within the last 8 years?	V No.  Yes. District  District  District	When	MM / DD / YYYY  MM / DD / YYYY	Case number  Case number  Case number
10.	Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	Ves. Debtor District Debtor District	Wher Wher	MM / DD / YYYY	Relationship to you  Case number, if known  Relationship to you  Case number, if known
11.	Do you rent your residence?	✓ No. Go to lir	d obtained an eviction judgment anne 12.  Initial Statement About an Eviction nkruptcy petition.		st You (Form 101A) and file it with

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Fleming Debtor 1 Kaila Case number (if known) First Name Middle Name Last Name Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole No. Go to Part 4. proprietor of any fullor part-time Yes. Name and location of business business? Name of business, if any A sole proprietorship is a business you operate as an Number Street individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than State Zip Code one sole proprietorship, use a Check the appropriate box to describe your business: separate sheet and Health Care Business (as defined in 11 U.S.C. § 101(27A)) attach it to this petition. Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set Chapter 11 of the appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance Bankruptcy Code and sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 11 16(1)(B). are vou a small business debtor? Ⅵ I am not filing under Chapter 11. For a definition of small business debtor, No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the see 11 U.S.C. § Bankruptcy Code. 101(51D). Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have ✓ No. any property that Yes. What is the hazard? poses or is alleged to pose a threat of imminent and If immediate attention is needed, why is it needed? identifiable hazard to public health or safety? Or do you Where is the property? own any property Street Number that needs immediate attention? For example, do you own perishable goods, City State Zip Code or livestock that must be fed, or a building that needs urgent repairs?

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Debtor 1 Kaila Fleming Case number (if known)

#### First Name Middle Name Last Name Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): You must check one: You must check one: 15. Tell the court whether you have ✓ I received a briefing from an approved credit I received a briefing from an approved credit received briefing counseling agency within the 180 days before I counseling agency within the 180 days before I about credit filed this bankruptcy petition, and I received a filed this bankruptcy petition, and I received a counseling. certificate of completion. certificate of completion. Attach a copy of the certificate and the payment plan, Attach a copy of the certificate and the payment plan, The law requires that if any, that you developed with the agency. if any, that you developed with the agency. you receive a briefing about credit I received a briefing from an approved credit I received a briefing from an approved credit counseling before you counseling agency within the 180 days before I counseling agency within the 180 days before I file for bankruptcy. filed this bankruptcy petition, but I do not have a filed this bankruptcy petition, but I do not have a certificate of completion. certificate of completion. You must truthfully check one of the Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, following choices. If you MUST file a copy of the certificate and payment you MUST file a copy of the certificate and payment you cannot do so, you plan, if any. plan, if any. are not eligible to file. I certify that I asked for credit counseling services ☐ I certify that I asked for credit counseling services from an approved agency, but was unable to from an approved agency, but was unable to If you file anyway, the obtain those services during the 7 days after I obtain those services during the 7 days after I court can dismiss your made my request, and exigent circumstances made my request, and exigent circumstances case, you will lose merit a 30-day temporary waiver of the merit a 30-day temporary waiver of the whatever filing fee you requirement. requirement. paid, and your creditors can begin To ask for a 30-day temporary waiver of the To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what requirement, attach a separate sheet explaining what collection activities efforts you made to obtain the briefing, why you were efforts you made to obtain the briefing, why you were again. unable to obtain it before you filed for bankruptcy, and unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this what exigent circumstances required you to file this Your case may be dismissed if the court is dissatisfied Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before with your reasons for not receiving a briefing before you filed for bankruptcy. you filed for bankruptcy. If the court is satisfied with your reasons, you must still If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed. If you do not do so, your case may be dismissed. Any extension of the 30-day deadline is granted only Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit I am not required to receive a briefing about credit counseling because of: counseling because of: I have a mental illness or a mental I have a mental illness or a mental Incapacity. Incapacity. deficiency that makes me deficiency that makes me incapable of realizing or making incapable of realizing or making rational decisions about finances. rational decisions about finances. Disability. My physical disability causes me to Disability. My physical disability causes me to be unable to participate in a be unable to participate in a briefing in person, by phone, or briefing in person, by phone, or through the internet, even after I through the internet, even after I reasonably tried to do so. reasonably tried to do so. Active duty. I am currently on active military Active duty. I am currently on active military duty in a military combat zone. duty in a military combat zone. If you believe you are not required to receive a briefing If you believe you are not required to receive a briefing about credit counseling, you must file a motion for about credit counseling, you must file a motion for

waiver of credit counseling with the court.

waiver of credit counseling with the court.

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Debtor 1 Kaila Flemina Case number (if known) First Name Middle Name Last Name Part 6: **Answer These Questions for Reporting Purposes** 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as 16. What kind of debts do "incurred by an individual primarily for a personal, family, or household purpose." you have? No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. 17. Are you filing under No. I am not filing under Chapter 7. Go to line 18. Chapter 7? Do you estimate that Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative after any exempt expenses are paid that funds will be available to distribute to unsecured creditors? property is excluded □ No. and administrative expenses are paid that Yes. funds will be available for distribution to unsecured creditors? **1**-49 1,000-5,000 25,001-50,000 18. How many creditors 50-99 5,001-10,000 50,001-100,000 do vou estimate that you owe? 100-199 10,001-25,000 More than 100,000 200-999 \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 19. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your assets to be worth? \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 20. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion liabilities to be? \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion Part 7: Sign Below I have examined this petition, and I declare under penalty of perjury that the information provided is true and For you correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. X X /s/ Kaila Fleming Signature of Debtor 1 Signature of Debtor 2 4/17/2018 Executed on Executed on MM / DD / YYYY MM / DD / YYYY

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Debtor 1 Kaila		Fleming	Case number (ii	fknown)
First Name	Middle Name	Last Name		
For your attorney, if you are represented by one	eligibility to proceed und	ler Chapter 7, 11, 12, c	or 13 of title 11, Unite	nave informed the debtor(s) about ad States Code, and have explained the also certify that I have delivered to the
If you are not	debtor(s) the notice requi	ired by 11 U.S.C. § 34	2(b) and, in a case in	which § 707(b)(4)(D) applies, certify that I
represented by an				dules filed with the petition is incorrect.
attorney, you do not	4.5			·
need to file this page.	/s/ Alicia Haro		Date _	4/17/2018
	Signature of Attorney for	or Debtor		MM / DD / YYYY
	Alicia Haro			
	Printed name			
	Semrad Law Firm			
	Firm name			
	11101 S. Western Aver	nue		
	Street			
	Object		102 2 -	00040
	Chicago		Illinois	60643
	City		State	Zip Code
	Contact phone		Email address	aharo@semradlaw.com
			<del></del>	
			Illinois	8
	Bar number	·	State	

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Fill in this infor	mation to identify your c	ase:	
Debtor 1	Kaila		Fleming
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filing)	First Name	Middle Name	Last Name
United States E	Sankruptcy Court for the:	Northern	District of Illinois
Case number (If known)			(State)

Check if this is an
amended filing

#### Official Form 106Sum

#### Summary of Your Assets and Liabilities and Certain Statistical Information 12/

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

	Your assets Value of what you own
I. Schedule A/B: Property (Official Form 106A/B)	\$0.00
1a. Copy line 55, Total real estate, from Schedule A/B	\$6,875.00
1b. Copy line 62, Total personal property, from Schedule A/B	
1c. Copy line 63, Total of all property on Schedule A/B	\$6,875.00
Part 2: Summarize Your Liabilities	
	<b>Your liabilities</b> Amount you owe
2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$17,511.00
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)	\$0.00
3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$11,395.00
Your total liabilities	\$28,906.00
0	L
Part 3: Summarize Your Income and Expenses	
4. Schedule I: Your Income (Official Form 106I)	\$2,963.32
Copy your combined monthly income from line 12 of Schedule I	
5. Schedule J: Your Expenses (Official Form 106J)	\$2,738.00
	φ2,130.00

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Deb	otor 1 Kaila		Fleming	Case number (if known)	
	First Name	Middle Name	Last Name		
Part	4: Answer These Que	stions for Administrat	tive and Statistical Records	S	
6. <b>A</b>	are you filing for bankruptcy	under Chapters 7, 11, o	r 13?		
[	No. You have nothing to	report on this part of the fo	orm. Check this box and submit t	his form to the court with your other sch	nedules.
[	✓ Yes.				
7. <b>V</b>	Vhat kind of debt do you ha	ve?			
[			umer debts are those incurred by Fill out lines 8-10 for statistical pu	an individual primarily for a personal, rposes. 28 U.S.C. § 159.	
[	Your debts are not prime this form to the court with		ou have nothing to report on this	part of the form. Check this box and su	bmit
	From the Statement of You Form 122A-1 Line 11; <b>OR</b> , F		ne: Copy your total current month orm 122C-1 Line 14.	nly income from Official	\$0.00
9.	Copy the following specia	l categories of claims fro	om Part 4, line 6 of Schedule E	/F:	
	From Part 4 on Schedule	E/F, copy the following:		Total claim	
	9a. Domestic support obliga	ations (Copy line 6a.)		\$0.00	
	9b. Taxes and certain other	debts you owe the govern	ment. (Copy line 6b.)	\$0.00	
	9c. Claims for death or pers	onal injury while you were	intoxicated. (Copy line 6c.)	\$0.00	
	9d. Student loans. (Copy lin	e 6f.)		\$4,068.00	
	9e. Obligations arising out of priority claims. (Copy line 6g		or divorce that you did not report	as \$0.00	
	9f. Debts to pension or prof	it-sharing plans, and other	similar debts. (Copy line 6h.)	\$0.00	

\$4,068.00

9g. **Total.** Add lines 9a through 9f.

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Fill in this i	information to ide	entify your case:						
Debtor 1	Kaila				Fleming			
	First Name		Middle Na	me	Last Name			
Debtor 2 (Spouse, if fili	ing) First Name		Middle Na	me	Last Name			
	tes Bankruptcy Co	ourt for the: Northe			District of Illinois			
Case num	ber				(State)			
, ,	L Corpo 100	2 A /D						Check if this is an
	I Form 100							amended filing
Sched	dule A/B:	Property						12/1
category w responsible write your	where you think i e for supplying c name and case	t fits best. Be as co orrect information. number (if known).	omplete and . If more spa Answer eve	d acci ace is ery qu	sset only once. If an asset fits in more urate as possible. If two married peop needed, attach a separate sheet to estion. Other Real Estate You Own or H	ole are this fo	filing together, both a	are equally
1. Do you	own or have any	/ legal or equitable	interest in	any r	esidence, building, land, or similar pi	roperty	<i>l</i> ?	
<b>V</b>	No. Go to Part 2							
	Yes. Where is the	property?						
1.1	Street address, if	available, or other de		Si	is the property? Check all that apply.  ngle-family home  uplex or multi-unit building		the amount of any secu	claims or exemptions. Put ired claims on Schedule D: nims Secured by Property.
					ondominium or cooperative		Current value of the	Current value of the
				Шм	anufactured or mobile home		entire property?	portion you own?
	Number Stre	eet			and		Describe the nature o	f vour ownership
					vestment property meshare		interest (such as fee s	simple, tenancy by
	City	State Zip	Code		ther		the entireties, or a life	e estate), if Known.
				Who hone.	nas an interest in the property? Check	k	Check if this is co (see instructions)	ommunity property
				De	ebtor 1 only		ш	
				De De	ebtor 2 only			
				De De	ebtor 1 and Debtor 2 only			
				At	least one of the debtors and another			
					information you wish to add about the rty identification number:	his iter	n, such as local	
If you	own or have more	than one, list here:			· · · · · · · · · · · · · · · · · · ·			
			ļ	What	is the property? Check all that apply.			claims or exemptions. Put ired claims on <i>Schedule D:</i>
1.2	Street address, if	available, or other de	escription		ngle-family home			nims Secured by Property.
					uplex or multi-unit building		Current value of the	Current value of the
					ondominium or cooperative anufactured or mobile home		entire property?	portion you own?
					and		<del></del>	-
	Number Stre	eet			vestment property		Describe the nature o	
					meshare		interest (such as fee s the entireties, or a life	
	City	State Zip	Code	▤▫	ther			
				Who h	nas an interest in the property? Check	k	Check if this is co (see instructions)	mmunity property
				L De	ebtor 1 only		_	
					ebtor 2 only			
					ebtor 1 and Debtor 2 only			
				At	least one of the debtors and another			
					information you wish to add about the rty identification number:	his iter	n, such as local	

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Debtor 1	Kaila		Fleming	Case numbe	r (if known)	
	First Name	Middle Name	Last Name			
1.3	et address, if available, or ot	[	Vhat is the property? Check all that a Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home	apply.	the amount of any secu	claims or exemptions. Put red claims on Schedule D: ims Secured by Property.  Current value of the portion you own?
Nur City	mber Street  State	Zip Code	Land Investment property Timeshare Other	_	Describe the nature o interest (such as fee s the entireties, or a life	imple, tenancy by
		[ [ [ ]	Who has an interest in the property Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and and Other information you wish to add a	other	(see instructions)	mmunity property
	the dollar value of the pove attached for Part 1. Wi	rtion you own for a	ıll of your entries from Part 1, inclu	ding any entrie	s for pages	
<b>Do you ov</b> you own t	hat someone else drives. If y ans, trucks, tractors, sport ut	equitable interest you lease a vehicle, a	in any vehicles, whether they are also report it on Schedule G: Executor cycles	-	-	
3.1	Make Model: Year:	Chevrolet Cruze 2015	Who has an interest in the propone.	erty? Check	the amount of any secu	claims or exemptions. Put ured claims on <i>Schedule D:</i> aims Secured by Property.
	Approximate mileage: Other information: 2015 Chevrolet Cruze	40000	Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and Check if this is community		Current value of the entire property? \$10150.00	Current value of the portion you own? \$5075.00
3.2	Make Model: Year:		who has an interest in the propone.  Debtor 1 only		the amount of any secu	claims or exemptions. Put ured claims on <i>Schedule D:</i> aims Secured by Property.
	Approximate mileage: Other information:		Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and Check if this is community instructions)		Current value of the entire property?	Current value of the portion you own?

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tor 1	Nalia		Fleming Case nu	ımber <i>(if known)</i>	
	First Name	Middle Name	Last Name	· · · · · ·	
3.3	Make Model: Year: Approximate mileage: Other information:	one.  Debt  Debt  Debt  At lea	s an interest in the property? Checor 1 only or 2 only or 1 and Debtor 2 only ast one of the debtors and another ck if this is community property (selections)	the amount of any sector of the control of the cont	claims or exemptions. Pured claims on Schedule aims Secured by Property  Current value of the portion you own?
3.4	Make Model: Year: Approximate mileage:	one.	s an interest in the property? Checor 1 only	the amount of any sector Creditors Who Have Classifications	claims or exemptions. Fured claims on Schedule aims Secured by Property
	Other information:		or 2 only or 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
			ast one of the debtors and another		
Exar	nples: Boats, trailers, motors, per	ATVs and other recreation	ck if this is community property (se uctions) onal vehicles, other vehicles, and a ssels, snowmobiles, motorcycle access	accessories	
	nples: Boats, trailers, motors, pei No Yes Make	ATVs and other recreations sonal watercraft, fishing ves	uctions) onal vehicles, other vehicles, and a	accessories ssories ek Do not deduct secured	
Exar	nples: Boats, trailers, motors, pei No Yes	ATVs and other recreations on all watercraft, fishing vessions.  Who has one.  Debt	cuctions)  conal vehicles, other vehicles, and a seels, snowmobiles, motorcycle access  s an interest in the property? Checor 1 only or 2 only	accessories ssories  k Do not deduct secured the amount of any secured Creditors Who Have Cla	claims or exemptions. Fured claims on Schedule laims Secured by Propert Current value of the
Exar	nples: Boats, trailers, motors, per No Yes Make Model: Year:	ATVs and other recreations sonal watercraft, fishing vessions one.  Debt  Debt  At lea	onal vehicles, other vehicles, and a seels, snowmobiles, motorcycle access an interest in the property? Check	accessories ssories  Do not deduct secured the amount of any secured to the acceptance of the entire property?	ured claims on <i>Schedule</i> aims Secured by Propert
4.1	Make Model: Approximate mileage: Other information:  Make Model: Year:  Make Model: Year:	ATVs and other recreations sonal watercraft, fishing vessions one.  Debt Debt At leading the content of the content of the content one. Debt Debt Debt Debt Debt Debt Debt Debt	constant to the property? Checks and a seels, snowmobiles, motorcycle access an interest in the property? Checks and another and Debtor 2 only ast one of the debtors and another ck if this is community property (secucions) an interest in the property? Checks and another ck an interest in the property? Checks and another ck an interest in the property? Checks and another ck an interest in the property? Checks and another ck an interest in the property?	accessories  ssories  Do not deduct secured the amount of any secured treatment of the entire property?  Current value of the entire property?  ee  by Do not deduct secured the amount of any secured the amount of any secured the secur	cured claims on Schedule aims Secured by Propertion  Current value of the portion you own?  Claims or exemptions. If the pured claims on Schedule aims on Schedule
4.1	mples: Boats, trailers, motors, per No Yes  Make Model: Year: Approximate mileage:  Other information:  Make Model:	ATVs and other recreations sonal watercraft, fishing vessional wat	constant of the property? Check or 1 only or 2 only or 1 and Debtor 2 only ast one of the debtors and another check if this is community property? Check or 1 only or 2 only ast one of the debtors and another check if this is community property (secucions) and interest in the property? Check or 1 and Debtor 2 only ast one of the debtors and another check if this is community property (secucions) and interest in the property? Check or 2 only 2 only 3 or 3 only 4 only 5 only 6	accessories  ssories  Do not deduct secured the amount of any secured treatment of the entire property?  Current value of the entire property?  ee  by Do not deduct secured the amount of any secured the amount of any secured the secur	ured claims on Schedule aims Secured by Propert Current value of the

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Debtor 1 Kaila Fleming Case number (if known) First Name Middle Name Last Name Part 3: **Describe Your Personal and Household Items** Current value of the Do you own or have any legal or equitable interest in any of the following items? portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware Yes. Describe... Bedroom Set \$200.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music Yes. Describe... TV. Cell Phone \$700.00 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles No Yes. Describe... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No Yes. Describe... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment No Yes. Describe... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories Yes. Describe... **Used Clothing** \$400.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No Yes. Describe... 13. Non-farm animals Examples: Dogs, cats, birds, horses Nο Yes. Describe... 14. Any other personal and household items you did not already list, including any health aids you did not list **✓** No Yes. Describe... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$1300.00 for Part 3. Write that number here ......

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Debtor 1 Kaila Fleming Case number (if known) First Name Middle Name Last Name Part 4: **Describe Your Financial Assets** Current value of the Do you own or have any legal or equitable interest in any of the following? portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition **✓** No Yes ..... Cash: ..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. Institution name: \$500.00 17.1. Checking account: Cash on Hand 17.2. Checking account: 17.3. Savings account: 17.4. Savings account: 17.5. Certificates of deposit: 17.6. Other financial account: 17.7. Other financial account: 17.8. Other financial account: 17.9. Other financial account: 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ◪ No Institution or issuer name: 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture **✓** No Name of entity % of ownership: Yes. Give specific information about them

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Debt	tor 1 Kaila		Fleming	Case number (if known)	
	First Name	Middle Name	Last Name		
20.	Negotiable instruments Non-negotiable instrum	orate bonds and other negotial include personal checks, cashiers' ents are those you cannot transfe	checks, promissory note	es, and money orders.	
	Yes. Give specific information about them	Issuer name:			
21.	Retirement or pension Examples: Interests in IF		, thrift savings accounts,	or other pension or profit-sharing plans	
	✓ No				
	Yes. List each	Type of account:	Institution name:		
	account	401(k) or similar plan:	_		
	separately.	Pension plan:			
		IRA:			
		Retirement account:			
		Keogh:			
		Additional account:			
		Additional account:			
22.		prepayments I deposits you have made so that with landlords, prepaid rent, public			
	Yes	Electric:			
		Gas:			
		Heating oil:			
		Security deposit on rental unit:			
		Prepaid rent:			
		Telephone:			
		Water:			
		Rented furniture:			
		Other:			
23.	Annuities (A contract fo	or a periodic payment of money to	you, either for life or for	a number of years)	
	✓ No ☐ Yes	Issuer name and description:			

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Debt	or 1 Kaila		Fleming	Case number (if known)	
24.	First Name  Interests in an educa	Middle Name	Last Name	r a qualified state tuition program.	
		, 529A(b), and 529(b)(1).	р		
	No Institution	on name and description. Separa	ately file the records of any interests	s.11 U.S.C. § 521(c):	
	Yes		,		
25.			ther than anything listed in line 1	1), and rights or powers	
	exercisable for your b	enefit			
	No Yes. Describe				
26.	Patents, copyrights,	 trademarks, trade secrets, an	nd other intellectual property		
	Examples: Internet don	nain names, websites, proceeds	from royalties and licensing agreer	ments	
	No Yes. Describe				
	Tes. Describe				
27.	Licenses, franchises,	and other general intangibles	s		
			ative association holdings, liquor lic	censes, professional licenses	
	✓ No				
	Yes. Describe				
Mar		d to you?			Current value of the
Mor	ney or property owe	d to you?			Current value of the portion you own?
Mor	ney or property owe	d to you?			portion you own? Do not deduct secured
	ney or property owe				portion you own?
					portion you own? Do not deduct secured claims or exemptions.
	Tax refunds owed to y  ✓ No  ☐ Yes. Give specific ir	ou		Federal:	portion you own? Do not deduct secured
	Tax refunds owed to y  No Yes. Give specific ir about them, ir you already fil	ou  Iformation Including whether Including wheth		Federal: State:	portion you own? Do not deduct secured claims or exemptions.
28.	Tax refunds owed to y  No Yes. Give specific ir about them, ir you already fil and the tax ye	ou  Iformation Including whether Including wheth			portion you own? Do not deduct secured claims or exemptions.
28.	Tax refunds owed to y  No Yes. Give specific ir about them, ir you already fill and the tax yes	ou  Iformation Including whether If the returns If	port, child support, maintenance, d	State:	portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00  \$0.00
28.	Tax refunds owed to y  No Yes. Give specific ir about them, ir you already fill and the tax yes	ou  Iformation Including whether If the returns If	port, child support, maintenance, d	State: Local:	portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00  \$0.00
28.	Tax refunds owed to y  No Yes. Give specific ir about them, ir you already fill and the tax yes  Family support  Examples: Past due or let	ou  Iformation Including whether If the returns If	port, child support, maintenance, d	State: Local:	portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00  \$0.00
28.	Tax refunds owed to y  No Yes. Give specific ir about them, ir you already fil and the tax yes  Family support  Examples: Past due or let  No	ou  Iformation Including whether If the returns If	port, child support, maintenance, d	State:  Local: divorce settlement, property settlement	portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00  \$0.00
28.	Tax refunds owed to y  No Yes. Give specific ir about them, ir you already fil and the tax yes  Family support  Examples: Past due or let  No	ou  Iformation Including whether If the returns If	port, child support, maintenance, d	State: Local: divorce settlement, property settlement Alimony:	portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00  \$0.00  t  \$0.00
28.	Tax refunds owed to y  No Yes. Give specific ir about them, ir you already fil and the tax yes  Family support  Examples: Past due or let  No	ou  Iformation Including whether If the returns If	port, child support, maintenance, d	State: Local: divorce settlement, property settlement Alimony: Maintenance:	portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00  \$0.00  t  \$0.00 \$0.00
28.	Tax refunds owed to y  No Yes. Give specific ir about them, ir you already fil and the tax yes  Family support  Examples: Past due or let  No	ou  Iformation Including whether If the returns If	port, child support, maintenance, d	State: Local: divorce settlement, property settlement Alimony: Maintenance: Support:	portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00  t \$0.00 \$0.00 \$0.00
29.	Tax refunds owed to y  No Yes. Give specific in about them, in you already fill and the tax yes  Family support Examples: Past due or let No Yes. Give specific in	ou  Information Including whether Including whet		State: Local:  divorce settlement, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement:	portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00  t  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
29.	Tax refunds owed to y  No Yes. Give specific ir about them, ir you already fil and the tax yes  Family support Examples: Past due or let No Yes. Give specific ir  Other amounts some of Examples: Unpaid wage	ou  Information Including whether Including whet	s, disability benefits, sick pay, vacati	State: Local:  divorce settlement, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement:	portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00  t  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
29.	Tax refunds owed to y  ✓ No  Yes. Give specific ir about them, ir you already fill and the tax yes  Family support  Examples: Past due or let  ✓ No  Yes. Give specific ir  Other amounts some of Examples: Unpaid wage Social Securi	ou  Information Including whether Including whet	s, disability benefits, sick pay, vacati	State: Local:  divorce settlement, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement:	portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00  t  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
29.	Tax refunds owed to y  ✓ No  Yes. Give specific ir about them, ir you already fill and the tax yes  Family support  Examples: Past due or let  ✓ No  Yes. Give specific ir  Other amounts someone Examples: Unpaid wage Social Securi	ou  Information Including whether Including whet	s, disability benefits, sick pay, vacati	State: Local:  divorce settlement, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement:	portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00  t  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00

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Deb <sup>1</sup>	tor 1 Kaila		Fleming	Case number (if known)	
	First Name	Middle Nam	e Last Name		
31.	Interests in insurance Examples: Health, disab		ealth savings account (HSA); credit, h	omeowner's, or renter's insurance	
	No Yes. Name the insu of each policy and l		Company name:	Beneficiary:	Surrender or refund value:
32.		of a living trust, expect	n someone who has died proceeds from a life insurance policy	y, or are currently entitled to receive	
33.			you have filed a lawsuit or made surance claims, or rights to sue	a demand for payment	
34.	Other contingent and to set off claims  No Yes. Describe	unliquidated claims o	f every nature, including counterd	claims of the debtor and rights	
35.	Any financial assets your No Yes. Describe	ou did not already list			
36.		-	om Part 4, including any entries fo		\$500.00
Part	5: Describe Any Bo	usiness-Related Pr	operty You Own or Have an Ir	nterest In. List any real estate in Pa	rt 1.
37.	No. Go to Part 6. Yes. Go to line 38.	ny legal or equitable in	nterest in any business-related pro	operty?	Current value of the portion you own? Do not deduct secured claims or exemptions
38.	Accounts receivable of No Yes. Describe	or commissions you al	ready earned		
39.	Office equipment, furr Examples: Business-relative No		re, modems, printers, copiers, fax ma	achines, rugs, telephones, desks, chairs, ele	ctronic devices

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Deb	tor 1 Kaila	Fleming	Case number (if known)	
40.	First Name  Machinery fixtures e	Middle Name Last Name quipment, supplies you use in business, and tools of y	vour trade	
40.	— »	quipment, supplies you use in business, and tools of	your trade	
	✓ No Yes. Describe			
	Tes. Bescribe			
41.	Inventory			
	<b>✓</b> No			
	Yes. Describe			
42.	Interests in partnersh	ps or joint ventures		
	<b>✓</b> No			
	Yes. Give specific	Name of entity:	% of ownership:	
	information about them			_
	uiciii			
43.	Customer lists, mailing	lists, or other compilations		
	<b>✓</b> No			
		clude personally identifiable information (as defined in 11	U.S.C. § 101(41A))?	
	No			
	Yes. Desc	ihe		
44.	Any business-related	property you did not already list		
	<b>✓</b> No			
	Yes. Give specific			<u> </u>
	information			
				<u> </u>
		II of your entries from Part 5, including any entries fo	or pages you have attached	
for P	art 5. Write that numbe	r here		
Pari		rm- and Commercial Fishing-Related Proper	ty You Own or Have an Interest In.	
	If you own or have an	interest in farmland, list it in Part 1.		
46.	Do you own or have a	ny legal or equitable interest in any farm- or commer	cial fishing-related property?	
	No. Go to Part 7.			Current value of the portion you own?
	Yes. Go to line 47.			Do not deduct secured claims
47	Farm animals			or exemptions
71.	Examples: Livestock, p	oultry, farm-raised fish		
	No			
	Yes. Describe			
	_			
1				

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Debt	or 1 Kaila First Name		eming C	Case number (if known)	
48.	Crops-either growing of		st Name		
10.	No	n nai rootou			
	Yes. Describe				
49.	Farm and fishing equip	ment, implements, machinery, fixture	s, and tools of trade		
	V No	, , ,	•		
	Yes. Describe				
	_				
50.	Farm and fishing suppl	ies, chemicals, and feed			
	<b>✓</b> No				
	Yes. Describe				
51.	Any farm- and commer	cial fishing-related property you did n	ot already list		
	<b>✓</b> No				
	Yes. Describe				
				_	
		l of your entries from Part 6, including			
for Pa ▶	rt 6. Write that number	here			
Part 7		perty You Own or Have an Interes		List Above	
53.		perty of any kind you did not already lists, country club membership	ST?		
	✓ No				
	Yes. Give specific				
	information				
54. Ad	dd the dollar value of al	I of your entries from Part 7. Write tha	t number here		•
	<b>-</b>				
Part 8	List the Totals of	Each Part of this Form			
55. <b>F</b>	art 1: Total real estate	, line 2		<b>&gt;</b>	
56 m	art 2 total vehicles, line	a 5			
-		d household items, line 15	\$5075.00		
	art 4: Total financial as		\$1300.00		
	Part 5: Total business-re		\$500.00		
			-		
	Part 7: Total other prope	ishing-related property, line 52	- <u></u> -		
0∠. Ι	otai personai property.	Add lines 56 through 61	\$6875.00	Copy personal property total	+ \$6875.00
					\$6075 OO
63. <b>T</b>	otal of all property on S	chedule A/B. Add line 55 + line 62			\$6875.00

		Case 18-11139	Doc 1 Filed 04 Docum		L3:57:51 Desc Main
Fill	in this inforr	nation to identify your case:			
Deb	otor 1	Kaila First Name	Middle Name	Fleming Last Name	
	otor 2 ouse, if filing)	First Name	Middle Name	Last Name	
Uni	ted States B	ankruptcy Court for the: <u>Nor</u>	thern D	istrict of Illinois	
	se number			(State)	
Of	ficial I	Form 106C			Check if this is an amended filing
Sc	hedule	C: The Propert	v You Claim a	s Exempt	04/16
For stat the tax-und	each iten e a specif amount o exempt re er a law t r exempti	es, write your name and on of property you claim a ic dollar amount as exer f any applicable statutor etirement funds—may be	case number (if known) as exempt, you must s mpt. Alternatively, you ry limit. Some exempt e unlimited in dollar a to a particular dollar ne applicable statutor	pecify the amount of the exemption I may claim the full fair market value ions—such as those for health aids, mount. However, if you claim an exe amount and the value of the propert	you claim. One way of doing so is to e of the property being exempted up to rights to receive certain benefits, and emption of 100% of fair market value y is determined to exceed that amount,
1.	Which set	of exemptions are you clair	ming? Check one only, ev	en if your spouse is filing with you.	
	✓ You a	re claiming state and federa	al nonbankruptcy exemp	tions. 11 U.S.C. § 522(b)(3)	
	You a	re claiming federal exemption	ons. 11 U.S.C. § 522(b)(2	2)	
2.	For any p	operty you list on Schedule	A/B that you claim as ex	xempt, fill in the information below.	
		ription of the property and hedule A/B that lists this	Current value of the portion you own	Amount of the exemption you claim  Check only one box for each exemption.	Specific laws that allow exemption
			Copy the value from Schedule A/B		

\$5,075.00

\$500.00

(Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)

Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

**✓** 

 $\overline{\mathbf{A}}$ 

\$0

\$500.00

100% of fair market value, up to any

100% of fair market value, up to any

applicable statutory limit

applicable statutory limit

No Yes

Brief

Brief

description:

Line from Schedule A/B:

description:

Line from Schedule A/B:

on Hand

Chevrolet Cruze, 2015,

Checking account, Cash

Are you claiming a homestead exemption of more than \$160,375?

2015 Chevrolet Cruze

735 ILCS 5/12-1001(c); 735 ILCS

5/12-1001(b)

735 ILCS 5/12-1001(b)

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Debtor	1 Kaila		leming Case number (if known)	
		iddle Name Li	ast Name	
Part 2:	Additional Page			
lin	ief description of the property and te on Schedule A/B that lists this operty	Current value of the portion you own  Copy the value from Schedule A/B	Amount of the exemption you claim  Check only one box for each exemption.	Specific laws that allow exemption
	ief iscription: Bedroom Set ne from	\$200.00	\$200.00  100% of fair market value, up to any	735 ILCS 5/12-1001(b)
	chedule A/B: 06		applicable statutory limit	
	scription: TV, Cell Phone	\$700.00	\$700.00	735 ILCS 5/12-1001(b)
	ne from chedule A/B:07		applicable statutory limit	
Lir	ief scription:  Used Clothing ne from thedule A/B:  11	\$400.00	\$400.00  100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(a)

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Fill in	this inforr	nation to identify your cas	se:				
Debto	or 1	Kaila		Fleming			
Debic	)	First Name	Middle Name	Last Name			
Debto		<del></del>					
	se, if filing)	First Name	Middle Name	Last Name			
United	d States B	ankruptcy Court for the:	Northern	District of Illinois (State)			
Case (If knov	number vn)					_	
Off	icial I	Form 106D					Check if this is a amended filing
Scl	hedu	le D: Credito	ors Who Hav	ve Claims Secure	ed by Prop	erty	12/1
more	space is r	needed, copy the Additio		e are filing together, both are equal ber the entries, and attach it to the	•		
		number (if known).					
1. I	-	reditors have claims se		•		and a sufficient forms	
ļ	<b>=</b>			vith your other schedules. You hav	e nothing else to rep	ort on this form.	
	<u> </u>	Fill in all of the information	i below.				
Part	1: List A	All Secured Claims					
2.	separatel	•	an one creditor has a parti	ured claim, list the creditor icular claim, list the other creditors order according to the creditor's	Column A  Amount of claim  Do not deduct the value of collateral.	Column B Value of collateral that supports	Column C Unsecured portion If any
2.1	Exeter Fi	nance LLC			\$14,511.00	this claim \$10,150.00	\$4,361.00
2.1	Creditor's	Name		that secures the claim:	Ψ14,511.00	Ψ10,100.00	ψ4,501.00
	PO BOX	( 166097 er Street	2015 Chevrolet Cruze  As of the date you file,	the claim is: Check all that apply.			
			Contingent	,			
	IRVING	TX 75016	Unliquidated				
	City	State ZIP Code	Disputed				
		es the debt? Check one. tor 1 only	Nature of lien. Check a	Il that apply.			
	Deb	tor 2 only		nade (such as mortgage or secured			
	Deb	tor 1 and Debtor 2 only	car loan)	as tax lien, mechanic's lien)			
	-	ast one of the debtors another	Judgment lien from	,			
		ck if this claim relates	Other (including a rig				
	To a Date de incurre		Last 4 digits of accoun				
2.2	City of C	hicago	Describe the property	that secures the claim:	\$3,000.00	\$10,150.00	\$0.00
	_	Randolph # 1100	2015 Chevrolet Cruze	Alexandrian in Observation at the standard			
	Numbe c/o Gol	er Street dman and Grant	Contingent	the claim is: Check all that apply.			
	Chicago	IL 60606	Unliquidated				
	City	State ZIP Code	Disputed				
		es the debt? Check one. tor 1 only	Nature of lien. Check a	II that annly			
		tor 2 only		nade (such as mortgage or secured			
		tor 1 and Debtor 2 only	car loan)	made (odd), de mongage er eesared			
	At le	ast one of the debtors		as tax lien, mechanic's lien)			
		another	Judgment lien from				
		ck if this claim relates community debt bt was	Other (including a rig	·			
	incurred		Last 4 digits of accoun	nt number			
		Add the dollar value of y here:	our entries in Column A	on this page. Write that number	\$17,511.00		

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Debtor 1	Kaila First Name	Middle Name	Fleming Last Name	Case number (if known)
Part 2:			hat You Already Listed	
agency Similar	y is trying to collect fro rly, if you have more th	om you for a debt you an one creditor for ar	owe to someone else, list	r a debt that you already listed in Part 1. For example, if a collection the creditor in Part 1, and then list the collection agency here. ted in Part 1, list the additional creditors here. If you do not have omit this page.
Nam 111	RRIS & HARRIS LTD ne W JACKSON BLVD S-4 nber Street	00		On which line in Part 1 did you enter the creditor?  2.2  Last 4 digits of account number
CHI City	CAGO	Illinois State	60604 Zip Code	

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Fill i	n this infori	nation to identify your c	ase:					
Deb	tor 1	Kaila		Fleming				
		First Name	Middle Name	Last Name				
Deb								
(Spot	use, if filing)	First Name	Middle Name	Last Name				
		ankruptcy Court for the:	Northern	District of Illinois (State)				
Case (If knd	e number own)							
Off	icial F	orm 106E/F				Che	eck if this is an	n amended filing
		<del></del>	ditors Who	Have Unse	cured Claims			12/15
Form clain the e know	106A/B) ans that are entries in the sinth (n).	and on Schedule G: Exe listed in Schedule D: C he boxes on the left. At	cutory Contracts and Une reditors Who Hold Claims	expired Leases (Official Secured by Property.	. Also list executory contracts Form 106G). Do not include a f more space is needed, copy top of any additional pages, v	ny creditor the Part yo	rs with partia ou need, fill i	ally secured it out, number
1.	-	editors have priority un Go to Part 2.	secured claims against y	ou?				
2.	listed, ider As much a Continuati	ntify what type of claim it as possible, list the claims on Page of Part 1. If mor	is. If a claim has both priorit	y and nonpriority amoun ding to the creditor's nam particular claim, list the of		both priority	and nonprio	rity amounts.
						Total claim	Priority amount	Nonpriority amount

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Debto	r 1 Kaila First Name Middle Name	Fleming Last Name	Case number (if known)	
Part 2				
3. D	o any creditors have nonpriority unsecured on No. You have nothing to report in this part Yes.  Stall of your nonpriority unsecured claims in the secured claim, list the creditor separately for each	. Submit this form to the submit this form to the submit the alphabetical order to the claim. For each claim	er of the creditor who holds each claim. If a creditor has more listed, identify what type of claim it is. Do not list claims already in Part 3.If you have more than four priority unsecured claims fill our	ncluded in Part 1.
4.1	EDFINANCIAL SERVICES L  Nonpriority Creditor's Name 120 N SEVEN OAKS DR  Number Street  KNOXVILLE Tennessee City State  Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a communis the claim subject to offset?  No Yes	37922 Zip Code	When was the debt incurred? 3/2015  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim:  ✓ Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify	Total claim\$2,544.00
4.2	EDFINANCIAL SERVICES L Nonpriority Creditor's Name 120 N SEVEN OAKS DR Number Street  KNOXVILLE Tennessee City State Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim relates to a commun Is the claim subject to offset?  No Yes	37922 Zip Code	When was the debt incurred? 11/2015  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim:  ✓ Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify	<u>\$1,524.00</u>
4.3	ENHANCED RECOVERY CO L Nonpriority Creditor's Name 8014 BAYBERRY RD Number Street  JACKSONVILLE Florida City State Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim relates to a commun Is the claim subject to offset?  No	32256 Zip Code	Last 4 digits of account number 8887  When was the debt incurred? 1/2018  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim:  Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts  001 Collection; Collecting for ORIGINAL CREDITOR: COMCAST Other. Specify CABLE COMMUNICATIONS	\$152.00

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Debtor 1 Kaila Fleming Case number (if known) First Name Middle Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.4 IL COLL UNLT \$7,175.00 Last 4 digits of account number 5558 Nonpriority Creditor's Name BOX 305 When was the debt incurred? 11/2013 Number Street As of the date you file, the claim is: Check all that apply. Contingent **PEKIN** Illinois 61554 Unliquidated City Zip Code State Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Collection; Collecting for Is the claim subject to offset? **✓** ORIGINAL CREDITOR: 09 No Other. Specify UNIVERSITY PLAZA 0

Yes

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Debtor 1 Kaila Fleming Case number (if known)

FIRST INAL	ne Middle Name Last Name			
Part 4: Add th	e Amounts for Each Type of Unsecured Claim			
	mounts of certain types of unsecured claims. This information is nounts for each type of unsecured claim.	for s	tatistical reporting purposes only	y. 28 U.S.C. §159.
			Total claims	
Total claims from Part 1	6a. Domestic support obligations.	6a.	\$0.00	
	6b. Taxes and certain other debts you owe the government	6b.	\$0.00	
	6c. Claims for death or personal injury while you were intoxicated	6c.	\$0.00	
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$0.00	
	6e. Total. Add lines 6a through 6d.	6e.	\$0.00	
			Total claims	
Total claims from Part 2	6f. Student loans	6f.	\$4,068.00	
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$0.00	
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h.	\$0.00	
	6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$7,327.00	
	6j. Total. Add lines 6f through 6i.	6j.	\$11,395.00	

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Debtor 1	Kaila		Fleming	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States B	Sankruptcy Court for the:	Northern	District of Illinois (State)	
Case number	-		. ,	
(If known)				

#### Official Foffit 100G

k if this is an nded filing

#### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

ı	Person or comp	pany with whom you have	the contract or lease	State what the contract or lease is for
2.1	Bishop Apartme Name 436 W. 66th St.			Residential Lease, Debtor is Lessee, Yearly Residential Lease
	Number Chicago City	Street Illinois State	60621 Zip Code	

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			Doo	ument Page 2	29 of 66	5
Fill in t	this infor	mation to identify your c	ase:			
Debtoi	r 1	Kaila		Fleming		
		First Name	Middle Name	Last Name		
Debtoi (Spouse	r 2 e, if filing)	First Name	Middle Name	Last Name		
United	States E	ankruptcy Court for the:	Northern	District of Illinois		
Case r	number			(State)		
(If know	n)					Check if this is an amended filing
Offi	cial	Form 106H				a
-		e H: Your Cod	lebtors			12/1
the ent	tries in t ). Answe	he boxes on the left. At r every question.		o this page. On the top o	of any Addi	ded, copy the Additional Page, fill it out, and number itional Pages, write your name and case number (if
	☐ No					
2.			ou lived in a community pro da, New Mexico, Puerto Rico			<i>ity property states and territories</i> include Arizona, )
	✓ No	. Go to line 3.				
	☐ Ye	s. Did your spouse, for	mer spouse, or legal equiva	lent live with you at the t	ime?	
		No Yes. In which commu	nity state or territory did yo	ı live?	Fill in th	ne name and current address of that person.
		Name of your spouse, f	ormer spouse, or legal equiva	alent		
		Number Street			<u> </u>	
		City	State	Zip Code		
	again a	s a codebtor only if that	person is a guarantor or o	osigner. Make sure you	have listed	use is filing with you. List the person shown in line 2 d the creditor on Schedule D (Official Form 106D), chedule E/F, or Schedule G to fill out Column 2.
	Column	1: Your codebtor				mn 2: The creditor to whom you owe the debt
[ ]					Chec	k all schedules that apply:
3.1	Poe, Lat	oria			— <b>•</b>	Schedule D, line 2.1

60621

Zip Code

Schedule E/F, line\_\_\_\_\_

Schedule G, line \_\_

Name

Number

Chicago

City

434 W. 66th St.

Illinois

State

Street

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				3.5		
Fill in this inform	ation to identify	your case:				
Debtor 1 Ka			Fleming		_	
	st Name	Middle Name	Last Na	me	Che	eck if this is:
Debtor 2 (Spouse, if filing) First	st Name	Middle Name	Last Na	me	-	An amended filing
						A supplement showing post-petition chapter 1
United States Ban the:	kruptcy Court for	Northern	District of Illin	ois ate)		expenses as of the following date:
Case number			(00	ate)		
(If known)					_	MM / DD / YYYY
Official Fo	rm 106l					
Schedule	I: Your In	come				12/1
information abou spouse. If more s number (if know	it your spouse. I space is needed	f you are separated and I, attach a separate she y question.	d your spouse	e is not filing	g with you, do	r spouse is living with you, include not include information about your ional pages, write your name and case
1. Fill in your em	ployment		Debtor 1			Debtor 2
information.		Employment status	Cal Canadau	1		- Frankright
•	re than one job,	p.oy	Employ			Employed
attach a separa information abo			Not Em	pioyea		Not Employed
employers.		Occupation	Trimmer			
•	e, seasonal, or	Employer's name	West Liberty	/ Foods, LLC		
self-employed	work.	Employer's address	750 S Schn	nidt Rd		
Occupation ma or homemaker,	y include student if it applies.		Number Stre			Number Street
			Bolingbrool City	K Illinois State	60440 Zip Code	City State Zip Code
		How long employed there?				
Part 2: Give D	etails About N	Nonthly Income				
spouse unless yo If you or your nor	u are separated.	e more than one employer,	-	nformation for	-	write \$0 in the space. Include your non-filing or that person on the lines below. If you need
-	•	ary, and commissions (before, calculate what the monthly v		2.	\$3,190.37	non-filing spouse
<ol><li>Estimate an</li></ol>	d list monthly over	rtime pay.		3.	+ \$0.00	

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Deb	otor 1Kaila First Name		Last Name		Case number	er <i>(if</i>		
	riist Naine	Middle Name	Last Name		known) For Debtor 1	For Debtor 2 or non-filing spouse		
C	opy line 4 here		→	4.	\$3,190.37		•	
5. <b>Li</b>	st all payroll deduc							
		and Social Security deductions		5a.	\$244.05			
5	b. Mandatory conti	ributions for retirement plans		5b.	\$0.00			
5	c. Voluntary contril	outions for retirement plans		5c.	\$0.00			
5	d. Required repayn	nents of retirement fund loans		5d.	\$0.00			
5	e. Insurance			5e.	\$0.00			
5	f. Domestic suppor	t obligations		5f.	\$0.00			
5	g. <b>Union dues</b>			5g.	\$0.00			
5	h. Other deduction	s. Specify:		5h. +	\$0.00			
6. <b>A</b> 6 +5h.		ictions. Add lines 5a + 5b + 5c + 5d + 5e +5	5f + 5g	6.	\$244.05			
7. <b>C</b> a	alculate total mont	thly take-home pay. Subtract line 6 from line	e 4.	7.	\$2,946.32			
8. <b>Li</b>	st all other income	regularly received:						
8	business, profess	•						
		t for each property and business showing dinary and necessary business expenses, and	d					
	the total monthly			8a.	\$0.00			
8	b. Interest and divi	dends		8b.	\$0.00			
8	dependent regul							
		spousal support, child support, maintenance, t, and property settlement.	,	8c.	\$0.00			
8	d. Unemployment o	compensation		8d.	\$0.00			
8	e. Social Security			8e.	\$0.00			
8	Include cash assis cash assistance th	nt assistance that you regularly receive tance and the value (if known) of any non-at you receive, such as food stamps (benefitnental Nutrition Assistance Program) or	s	8f.	\$0.00			
8	g. Pension or retire	ement income		8g.	\$0.00			
8	h. Other monthly in	ncome. Specify: Pro-Rated Income Tax Refu	und	8h. +	\$17.00	·		
		Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g		9.	\$17.00			
		ncome. Add line 7 + line 9. 10 for Debtor 1 and Debtor 2 or non-filing s	spouse	10.	\$2,963.32	+	=	\$2,963.32
Ir fr	nclude contributions riends or relatives.	lar contributions to the expenses that yo from an unmarried partner, members of you nounts already included in lines 2-10 or amo	r househol	d, your	dependents, your room	,		
s	specify:						11. +	\$0.00
		the last column of line 10 to the amount the Summary of Schedules and Statistical Sc				,	12.	\$2,963.32
13. <b>I</b>	Do you expect an in ✓ No.	ncrease or decrease within the year after	you file th	nis form	?			Combined monthly income
֓֞֞֞֜֞֜֞֜֞֜֞֜֞֜֞֜֞֜֜֜֓֓֓֓֜֜֜֟	Yes. Explain:							

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		Doc	ument Page 32 of 66	)		
Fill in this inform	mation to identify your c	ase:				
Debtor 1	Kaila		Fleming			
	First Name	Middle Name	Last Name	Check if this is:		
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	An amended filing	j	
United States B	ankruptcy Court for the:	Northern	District of Illinois (State)	A supplement sho		-petition chapter 13 date:
Case number (If known)			(Otate)	MM / DD / YYYY		
Official	Form 106J					
Schedule	J: Your Exp	enses				12/15
information. If r	-	attach another sheet to thi	are filing together, both are equall s form. On the top of any additiona			
1. Is this a joir		<u>.                                    </u>				
✓ No. Go	to line 2					
	oes Debtor 2 live in a se	enarate household?				
		parato nouconora				
Ļ	No Silvino di Silvino	000115				
L		·	enses for Separate Household of Debi	or 2.		
2. Do you have						
Do not list D Debtor 2.		es. Fill out this information for ch dependent	Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does der with you	pendent live ?
3. Do your exp	enses include people other  No	)				
than yourself and dependents	l your					
	· nate Your Ongoing N	Monthly Expenses				
-	f a date after the bankr		you are using this form as a suppl pplemental Schedule J, check the	-		•
	-	ash government assistance on Schedule I: Your Incom	-			Your expenses
	or home ownership expression or lot. 4.	penses for your residence.	Include first mortgage payments and		4.	\$615.00
If not incl	uded in line 4:					
4a. Real es	state taxes				4a	\$0.00

4b.

4c.

4d.

\$0.00

\$0.00

\$0.00

4b. Property, homeowner's, or renter's insurance

4c. Home maintenance, repair, and upkeep expenses

4d. Homeowner's association or condominium dues

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 Debtor 1 First Name
 Kaila Fleming Fleming Fleming
 Case number (if known)

 Last Name
 Last Name

5. Additional mortgage payments for your residence, such as home equity loans         5.         \$0.00           5. Utilities:         6a. Electricity, heat, natural gas         6a.         \$300.00           6b. Waller, sewer, gurbage collection         6b.         \$0.00           6c. Telaphone, oil phone, Internet, satellite, and cable services         6c.         \$200.00           6c. Oiler, Spoodly:         6d.         \$0.00           7. Food and housekeeping supplies         7.         \$363.00           8. Childcare and children's education costs         8.         \$0.00           9. Clothing, Laundry, and dry cleaning         9.         \$350.00           10. Personal care products and services         11.         \$300.00           11. Medical and dental expenses         11.         \$300.00           12. Transportation, include gas, maintanance, bus or train fure.         12.         \$400.00           Do not include or any payments         14.         \$0.00           15. Entertainment, clubs, recreation, newspapers, magazines, and books         14.         \$0.00           16. Charitable contributions and religious donations         14.         \$0.00           15. Life insurance         15a         \$0.00           15. Whick insurance         15a         \$0.00           15. Whick in sura	First Name	Middle Name Last Name		
Secues   S				Your expenses
6a. Electricity, heat, natural gas         6a.         \$300.00           6b. Water, sewer, garbage collection         6b.         \$0.00           6c. Telephone, cell phone, internet, stalliller, and cable services         6c.         \$200.00           6d. Other. Specify:         6d.         \$0.00           7. Food and housekeeping supplies         7.         \$363.00           8. Childcare and children's education costs         8.         \$0.00           9. Citothing, laundry, and dry cleaning         9.         \$85.00           10. Personal care products and services         11.         \$30.00           11. Medical and dental expenses         11.         \$30.00           12. Transportation, include gas, maintenance, bus or train fare.         12.         \$400.00           Do not include car payments         13.         \$0.00           14. Charitable contributions and religious donations         14.         \$0.00           15. Instantament, clubs, recreation, newspapers, magazines, and books         15.         \$0.00           15. Instantament, clubs, recreation, newspapers, magazines, and books         13.         \$0.00           15. Install insurance         15.         \$0.00           15. Life insurance         15.         \$0.00           15. Life insurance         15.         \$	5. Additional mortgage paym	ents for your residence, such as home equity loans	5.	\$0.00
6b. Water, sewer, garbage collection         6b.         \$0.00           6c. Telephone, cell phone, Internet, satellite, and cable services         6c.         \$260.00           6d. Other, Specity:         7.         \$363.00           7. Food and housekceping supplies         7.         \$363.00           8. Childcare and children's education costs         8.         \$0.00           9. Clothing, laundry, and dry cleaning         9.         \$85.00           10. Personal care products and services         11.         \$30.00           11. Medical and dental expenses         11.         \$30.00           12. Transportation. Include gas, maintenance, bus or train fare.         12.         \$400.00           10. Do not include ace payements         13.         \$0.00           14. Charitable contributions and religious donations         13.         \$0.00           15. Insurance.         15.         \$0.00           15a. Life insurance deducted from your pay or included in lines 4 or 20.         15a.         \$0.00           15c. Vehicle insurance         15a         \$0.00           15c. Vehicle insurance         15b         \$0.00           15c. Vehicle insurance         15c         \$0.00           15c. Vehicle insurance         15c         \$0.00           15c. Taxes	6. Utilities:			
6c. Telephone, cell phone, Internet, satellite, and cable services         6c.         \$260.00           6d. Other, Specify;         6d.         \$0.00           7. Food and housekeeping supplies         7.         \$380.00           8. Childcare and children's education costs         8.         \$0.00           9. Clothing, laundry, and dry cleaning         9.         \$85.00           10. Personal care products and services         10.         \$110.00           11. Medical and dental expenses         11.         \$30.00           12. Transportation. Include gas, maintenance, bus or train fare.         12.         \$400.00           Do not include care payments         13.         \$0.00           14. Charitable contributions and religious donations         14.         \$0.00           15. Insurance.         15.         \$0.00           15. Letal insurance         15.         \$0.00           15. Letal insurance         15.         \$0.00           15c. Vehicle insurance         15.         \$0.00           15c. Vehicle insurance         15.         \$0.00           15c. Vehicle insurance.         \$0.00         \$0.00           15c. Vehicle insurance.         \$0.00         \$0.00           15c. Vehicle insurance.         \$0.00         \$0.00     <	6a. Electricity, heat, natural g	gas	6a.	\$300.00
6d. Other. Specify:         6d         \$0.00           7. Food and housekeeping supplies         7.         \$363.00           8. Childcare and children's education costs         8.         \$0.00           9. Clothing, laundry, and dry cleaning         9.         \$855.00           10. Personal care products and services         10.         \$110.00           11. Medical and dental expenses         11.         \$30.00           12. Transportation, include gas, maintenance, bus or train fare.         12.         \$400.00           Do not include car payments         13.         \$0.00           13. Entertainment, clubs, recreation, newspapers, magazines, and books         13.         \$0.00           14. Charitable contributions and religious donations         14.         \$0.00           15. Insurance.         15.         \$0.00           15a. Life insurance deducted from your pay or included in lines 4 or 20.         15c         \$0.00           15b. Health insurance         15a         \$0.00           15c. Vehicle insurance.         15c         \$0.00           15c. Vehicle insurance.         \$0.00         \$0.00           15c. Vehicle insurance.         \$0.00         \$0.00           15c. Taxes, Do not include taxes deducted from your pay or included in lines 4 or 20.         \$0.00	6b. Water, sewer, garbage c	ollection	6b.	\$0.00
7. Food and housekeeping supplies         7.         \$383.00           8. Childcare and childcare's education costs         8.         \$0.00           9. Clothing, laundry, and dry cleaning         9.         \$850.00           10. Personal care products and services         10.         \$110.00           11. Medical and dental expenses         11.         \$300.00           12. Transportation. Include gas, maintenance, bus or train fare.         12.         \$400.00           Do not include car payments         13.         \$0.00           13. Entertainment, clubs, recreation, newspapers, magazines, and books         13.         \$0.00           14. Charitable contributions and religious donations         14.         \$0.00           15. Insurance.         15a         \$0.00           15. Insurance.         15a         \$0.00           15b. Health insurance deducted from your pay or included in lines 4 or 20.         15a         \$0.00           15c. Vehicle insurance. Specify:         15a         \$0.00	6c. Telephone, cell phone, I	nternet, satellite, and cable services	6c.	\$260.00
8. \$0.00 9. Clothing, laundry, and dry cleaning 9. \$85.00 10. Personal care products and services 10. \$110.00 11. Medical and dental expenses 11. \$30.00 12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments 13. \$0.00 14. Charitable contributions and religious donations 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15c. Vehicle insurance 15d. Taxes, Do not include taxes deducted from your pay or included in lines 4 or 20. 15c. Vehicle insurance 15d. Taxes, Do not include taxes deducted from your pay or included in lines 4 or 20. 15d. Taxes, Do not include taxes deducted from your pay or included in lines 4 or 20. 15d. Taxes, Do not include taxes deducted from your pay or included in lines 4 or 20. 15d. Taxes, Do not include taxes deducted from your pay or included in lines 4 or 20. 15d. Taxes, Do not include taxes deducted from your pay or included in lines 4 or 20. 15d. Taxes, Do not include taxes deducted from your pay or included in lines 4 or 20. 15d. Taxes, Do not include taxes deducted from your pay or included in lines 4 or 20. 15d. Taxes, Do not include taxes deducted from your pay or included in lines 4 or 20. 15d. Taxes, Do not include taxes deducted from your pay or included in lines 4 or 20. 15d. Taxes, Do not include taxes deducted from your pay or included in lines 4 or 20. 15d. Taxes, Do not include taxes deducted from your pay or included in lines 4 or 20. 15d. Taxes, Do not include taxes deducted from your pay or included in lines 4 or 20. 15d. Taxes, Do not include taxes deducted from your pay or included in lines 4 or 20. 15d. Taxes, Do not included in lines 4 or 20. 15d. Taxes, Do not included in lines 4 or 20. 15d. Taxes, Do not include in lines 4 or 20. 15d. Taxes, Do not include in lines 4 or 20. 15d. Taxes, Do not include in lines 4 or 20. 15d. Taxes, Do not include in lines 4 or 20. 15d. Taxes, Do not include in lines 4 or 20. 15d. Taxes,	6d. Other. Specify:		6d	\$0.00
9. Clothing, laundry, and dry cleaning       9. \$85.00         10. Personal care products and services       10. \$110.00         11. Medical and dental expenses       11. \$30.00         12. Transportation, Include gas, maintenance, bus or train fare.       12. \$400.00         Do not include car payments       13. \$0.00         13. Entertainment, clubs, recreation, newspapers, magazines, and books       13. \$0.00         14. Charitable contributions and religious donations       15. neurance.         Do not include insurance deducted from your pay or included in lines 4 or 20.       15a. Life insurance       15b. \$0.00         15b. Health insurance       15b. \$0.00       15c. Vehicle insurance       15c. \$200.00         15c. Vehicle insurance. Specify	7. Food and housekeeping su	pplies	7.	\$363.00
10. Personal care products and services       10.       \$11.00         11. Medical and dental expenses       11.       \$30.00         12. Transportation. Include gas, maintenance, bus or train fare.       12.       \$400.00         Do not include car payments       13.       \$0.00         13. Entertainment, clubs, recreation, newspapers, magazines, and books       13.       \$0.00         14. Charitable contributions and religious donations       14.       \$0.00         15. Insurance.       15a. Life insurance deducted from your pay or included in lines 4 or 20.       15b. bealth insurance       15b.       \$0.00         15b. Health insurance       15b.       \$0.00 <t< td=""><td>8. Childcare and children's e</td><td>ducation costs</td><td>8.</td><td>\$0.00</td></t<>	8. Childcare and children's e	ducation costs	8.	\$0.00
11. Medical and dental expenses       11. \$30.00         12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.       12. \$400.00         13. Entertaliment, clubs, recreation, newspapers, magazines, and books       13. \$0.00         14. Charitable contributions and religious donations       14. \$0.00         15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.       15a. Life insurance       15a. \$0.00         15b. Health insurance       15b. \$0.00       \$0.00       \$0.00         15c. Vehicle insurance Specify:       15c. \$200.00       \$0.00         15c. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.       \$0.00       \$0.00         15c. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.       \$0.00       \$0.00         15c. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.       \$0.00       \$0.00         15c. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.       \$0.00       \$0.00         17c. Installment or lease payments:       17a       \$0.00       \$0.00         17b. Car payments for Vehicle 1       17a       \$0.00       \$0.00         17c. Other. Specify:       17c       \$0.00       \$0.00         17c. Other. Specify:       17c       \$0.00       \$	9. Clothing, laundry, and dry	cleaning	9.	\$85.00
12.   Transportation. Include gas, maintenance, bus or train fare. Do not include car payments   12.   \$400.00     13.   Entertainment, clubs, recreation, newspapers, magazines, and books   13.   \$0.00     14.   Charitable contributions and religious donations   14.   \$0.00     15.   Insurance.	10. Personal care products a	nd services	10.	\$110.00
Do not include car payments   13.	11. Medical and dental exper	nses	11.	\$30.00
14. Charitable contributions and religious donations       14. \$0.00         15. Insurance.       0 not include insurance deducted from your pay or included in lines 4 or 20.         15a. Life insurance       15a \$0.00         15b. Health insurance       15b \$0.00         15c. Vehicle insurance       15c \$200.00         15c. Vehicle insurance. Specify:       15d \$0.00         16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.       5pecify:         Specify:       16         17. Installment or lease payments:       17a \$375.00         17b. Car payments for Vehicle 1       17a \$375.00         17c. Other. Specify:       17c \$0.00         17c. Other. Specify:       17c \$0.00         18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).       18.         19. Other payments you make to support others who do not live with you.       5pecify:       19. \$0.00         20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.       20a \$0.00         20b. Real estate taxes.       20b \$0.00         20c. Property, homeowner's, or renter's insurance       20c \$0.00         20d. Maintenance, repair, and upkeep expenses.       20d \$0.00	-		12.	\$400.00
15. Insurance.	13. Entertainment, clubs, rec	reation, newspapers, magazines, and books	13.	\$0.00
Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance   15a   \$0.00 15b. Health insurance   15b   \$0.00 15c. Vehicle insurance   15c   \$200.00 15d. Other insurance. Specify:   15d   \$0.00 15d. Other insurance. Specify:   16   \$0.00 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:   16   \$0.00 17c. Installment or lease payments:   17a   \$375.00 17b. Car payments for Vehicle 1   17a   \$375.00 17c. Other. Specify:   17c   \$0.00 17c. Other. Specify:   17d   \$0.00 17d. Other. Specify:   17d   \$0.00 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 108I).   18. 19. Other payments you make to support others who do not live with you. Specify:   19.   \$0.00 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property   20a   \$0.00 20b. Real estate taxes.   20b   \$0.00 20c. Property, homeowner's, or renter's insurance   20c   \$0.00 20d. Maintenance, repair, and upkeep expenses.   20d   \$0.00	14. Charitable contributions	and religious donations	14.	\$0.00
15b. Health insurance		ducted from your pay or included in lines 4 or 20.		
15c. Vehicle insurance	15a. Life insurance		15a	\$0.00
15d. Other insurance. Specify:	15b. Health insurance		15b	\$0.00
16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.   Specify:	15c. Vehicle insurance		15c	\$200.00
Specify:	15d. Other insurance. Speci	fy:	15d	\$0.00
17.   Installment or lease payments:   17a. Car payments for Vehicle 1   17a   \$375.00   17b. Car payments for Vehicle 2   17b   \$0.00   17c. Other. Specify:   17c   \$0.00   17d. Other. Specify:   17d   \$0.00   18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).   18.   19. Other payments you make to support others who do not live with you.   19. \$0.00   20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.   20a   \$0.00   20b. Real estate taxes.   20b   \$0.00   20c. Property, homeowner's, or renter's insurance   20c. \$0.00   20d. Maintenance, repair, and upkeep expenses.   20d. \$0.00   \$0.00	16. Taxes. Do not include taxes	s deducted from your pay or included in lines 4 or 20.		
17. Installment or lease payments:  17a. Car payments for Vehicle 1  17b. Car payments for Vehicle 2  17b. Car payments for Vehicle 2  17c. Other. Specify:  17c. Other. Specify:  17d. Other. Specify:  17d. Other. Specify:  17d. Other. Specify:  17d. So.00  18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).  18. 19. Other payments you make to support others who do not live with you.  Specify:  19. \$0.00  20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.  20a. Mortgages on other property  20a \$0.00  20b. Real estate taxes.  20b \$0.00  20c. Property, homeowner's, or renter's insurance  20d. Maintenance, repair, and upkeep expenses.  20d. \$0.00	Specify:		16	\$0.00
17b. Car payments for Vehicle 2  17c. Other. Specify:  17d. Other. Specify:  17d. Other. Specify:  17d. So.00  18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).  19. Other payments you make to support others who do not live with you.  Specify:  20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.  20a. Mortgages on other property  20b. Real estate taxes.  20c. Property, homeowner's, or renter's insurance  20d. Maintenance, repair, and upkeep expenses.	17. Installment or lease payn	nents:	10	
17c. Other. Specify:	17a. Car payments for Vehic	cle 1	17a	\$375.00
17d. Other. Specify:	17b. Car payments for Vehic	cle 2	17b	\$0.00
17d. Other. Specify:	17c. Other. Specify:		17c	\$0.00
your pay on line 5, Schedule I, Your Income (Official Form 106I).  19. Other payments you make to support others who do not live with you.  Specify:  20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.  20a. Mortgages on other property  20a. \$0.00  20b. Real estate taxes.  20c. \$0.00  20c. Property, homeowner's, or renter's insurance  20d. Maintenance, repair, and upkeep expenses.			17d	\$0.00
19. Other payments you make to support others who do not live with you.  Specify:  20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.  20a. Mortgages on other property  20a \$0.00  20b. Real estate taxes.  20b \$0.00  20c. Property, homeowner's, or renter's insurance  20c \$0.00  20d. Maintenance, repair, and upkeep expenses.  20d \$0.00		• • • • • • • • • • • • • • • • • • • •		\$0.00
Specify:			18.	
20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.  20a. Mortgages on other property 20b. Real estate taxes. 20b. Property, homeowner's, or renter's insurance 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses. 20d. \$0.00		e to support others who do not live with you.	40	
20a. Mortgages on other property 20a. Mortgages on other property 20b. Real estate taxes. 20b \$0.00 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses. 20d \$0.00		see not included in lines 4 or 5 of this form or on Schodule I. Vour Income	19.	\$0.00
20b. Real estate taxes.  20b. \$0.00 20c. Property, homeowner's, or renter's insurance 20c. \$0.00 20d. Maintenance, repair, and upkeep expenses. 20d. \$0.00			202	\$0.00
20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses. 20d. \$0.00				
20d. Maintenance, repair, and upkeep expenses.  20d \$0.00		s, or renter's insurance		
			20e	\$0.00

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Debtor 1 Kaila			Fleming	Case number (if known)		
First N	ame	Middle Name	Last Name			
21.Other. Spec	cify:				21	\$0.00
22. Calculate	your monthly expe	nses.				\$2,738.00
	es 4 through 21.					\$0.00
22b. Copy I	ine 22 (monthly exp	enses for Debtor 2), if any,	from Official Form 106J-2			\$2,738.00
22c. Add lin	e 22a and 22b. The	result is your monthly exp	enses.		22.	
23. Calculate y	our monthly net in	come.				
23a. Copy I	ne 12 (your combin	ed monthly income) from	Schedule I.		23a	\$2,963.32
23b. Copy	our monthly expens	ses from line 22 above.			23b	\$2,738.00
		enses from your monthly i	ncome.			\$225.32
The re	sult is your monthly	net income.			23c	
For examp	le, do you expect to	finish paying for your car l	ses within the year after yoan within the year or do yo nodification to the terms of y	u expect your		

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Fill in this information to identify your case:								
Debtor 1	Kaila		Fleming					
	First Name	Middle Name	Last Name					
Debtor 2								
(Spouse, if filing)	First Name	Middle Name	Last Name					
United States E	Bankruptcy Court for the:	Northern	District of Illinois (State)					
Case number (If known)			(Cratis)					

#### Official Form 106Dec

#### Check if this is an amended filing

#### **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Par	t 1: Sign Below								
	Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?								
	<b>✓</b> No								
	Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).							
	Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.								
×	/s/ Kaila Fleming	*							
	Signature of Debtor 1	Signature of Debtor 2							
	Date 4/17/2018	Date							
	MM/DD/YYYY	MM/DD/YYYY							

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Fill in	n this info	rmation to identify your o	case:					
Debt	tor 1	Kaila		Fleming				
D.1.1	0	First Name	Middle	Name Last Nam	е			
Debt (Spou	or 2 use, if filing)	First Name	Middle	Name Last Nam	e			
Unite	ed States I	Bankruptcy Court for the:	Northern	District of Illino				
Case (If kno	e number			(Stat	e)			
								Check if this is a
Of	ficial	Form 107						amended filing
Sta	iteme	ent of Financia	al Affairs f	or Individuals	Filing for	Bankru	ptcy	04/1
infor	mation.		ed, attach a sep	arried people are filing arate sheet to this form				
Part	1: Give	e Details About Your	Marital Status	and Where You Lived	Before			
1.	What is	your current marital st	atus?					
	<b>П</b> Ма	arried						
	No.	t married						
2.	During	the last 3 years, have y	ou lived anywher	e other than where you liv	ve now?			
	<b>✓</b> No	1						
		s. List all of the places y	ou lived in the las	t 3 years. Do not include v	where you live n	OW.		
	De	btor 1:		Dates Debtor 1 lived there	Debtor 2:			Dates Debtor 2 lived there
					Same as	Debtor 1		Same as Debtor 1
						Zosto		
	Nu	mber Street		From	Number Stree	et		From
				To				To
	Cit	y State	Zip Code		City	State	Zip Code	
		,	,		Same as			Same as Debtor 1
					_			_
	Nu	mber Street		From	Number Stree	et		From
				То	-			То
	City	y State	Zip Code		City	State	Zip Code	
2	Within th	o last 8 years, did you a	war live with a cr	ouse or legal equivalent	in a community	property state	o or torritory? (C)	ammunity proporty etatoe
				oouse or legal equivalent siana, Nevada, New Mexico,				mmunity property states
	<b>✓</b> No							
	Yes.	Make sure you fill out S	chedule H: Your	Codebtors (Official Form	106H).			

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ebtor 1		Flemi		number (if known)	
	First Name Middle	e Name Last N	lame		
rt 2:	Explain the Sources of Your Inc	come			
Fill in activ	you have any income from employm  In the total amount of income you receivatives. If you are filing a joint case and you  No  Yes. Fill in the details.	ved from all jobs and all bu	sinesses, including part-time	-	years?
		Debtor 1		Debtor 2	
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	om January 1 of current year until e date you filed for bankruptcy:	Wages, commissions, bonuses, tips Operating a business	\$7000.00	Wages, commissions, bonuses, tips Operating a business	
	r last calendar year: anuary 1 to December 31, 2017 ) YYYY	Wages, commissions, bonuses, tips Operating a business	\$10000.00	Wages, commissions, bonuses, tips Operating a business	
	r the calendar year before that: anuary 1 to December 31, 2016 ) YYYY	Wages, commissions, bonuses, tips Operating a business	\$19000.00	Wages, commissions, bonuses, tips Operating a business	
publi filing List e	de income regardless of whether that in c benefit payments; pensions; rental in a joint case and you have income that each source and the gross income from No Yes. Fill in the details.	come; interest; dividends; you received together, list	money collected from lawsuits it only once under Debtor 1.	; royalties; and gambling and	
		Debtor 1		Debtor 2	
		Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)
	rom January 1 of current year until se date you filed for bankruptcy:				
	or last calendar year: anuary 1 to December 31, 2017 )  YYYY				
	or the calendar year before that: anuary 1 to December 31, 2016 )  YYYYY				

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Debtor 1 Kaila Flemina Case number (if known) First Name Middle Name Last Name List Certain Payments You Made Before You Filed for Bankruptcy Part 3: 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425\* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,425\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. \* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Was this payment Dates of payment Total amount paid Amount you still owe for Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors Other Mortgage Creditor's Name Number Street Credit card Loan repayment Citv Suppliers or State 7in Code vendors Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City Suppliers or State Zip Code vendors

Other

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tor 1 Kaila		Flen	ning	Case number	(if known)
First Name	Middle Name	Last	Name		
nsiders include your rela corporations of which yo	a business you operate a	rs; relatives of any g person in control, o	eneral partners; part or owner of 20% or	nerships of which y more of their voting	
Yes. List all payme	ents to an insider.				
_		Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
Insider's Name					
Number Street					
City St	ate Zip Code				
Insider's Name					
Number Street					
City St	ate Zip Code				
insider? Include payments on de	ou filed for bankruptcy, bts guaranteed or cosign nts that benefited an in	ed by an insider.	Total amount paid	Amount you still owe	n account of a debt that benefited an  Reason for this payment
					Include creditor's name
Insider's Name					
Number Street					
City St	ate Zip Code				
Insider's Name		<u> </u>			
Insider's Name  Number Street					
Number Street	ate Zip Code				

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Debtor 1 Kaila Flemina Case number (if known) First Name Part 4: Identify Legal Actions, Repossessions, and Foreclosures 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No Yes. Fill in the details. Nature of the case Status of the case Court or agency Case title Pending Court Name On appeal Case number NumberStreet Concluded State Zip Code Case title Pending Court Name On appeal Case number NumberStreet Concluded Citv State Zip Code Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Describe the property Value of the property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied. Describe the property Date Value of the property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code

Property was attached, seized, or levied.

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Debt	otor 1 Kaila	Fleming	Case number (if known)	
	First Name Middle Nan	ne Last Name		
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment bed		ank or financial institution, set off any am	ounts from your
	✓ No  Yes. Fill in the details.			
		Describe the action the	e creditor took  Date action was taken	Amount
	Creditor's Name			
	Number Street			
		Last 4 digits of account r	number: XXXX-	
	City State Zip Co	de		
12.	Within 1 year before you filed for bankrupto appointed receiver, a custodian, or anothe		possession of an assignee for the benefit o	f creditors, a court-
	✓ No			
	Yes			
Part	t 5: List Certain Gifts and Contribution	S		
13.	Within 2 years before you filed for bankrup  ✓ No  ✓ Yes. Fill in the details for each gift.  Gifts with a total value of more than \$		Dates you	Value
	per person		gave the gifts	
	Person to Whom You Gave the Gift			· <u></u>
	Number Street			
	City State Zip Co	de		
	Person's relationship to you			
	Person to Whom You Gave the Gift			· <u></u>
	Number Street			
	City State Zip Co	de		
	Person's relationship to you			

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	Kaila	Fleming Case number (if	known)	
	First Name Middle Name	Last Name		
. Wit	thin 2 years before you filed for bankruptcy, o	lid you give any gifts or contributions with a total val	ue of more than \$600	to any charity?
	I No			
✓	No			
	Yes. Fill in the details for each gift or contrib	ution.		
	Gifts or contributions to charities	Describe what you contributed	Date you	Value
	that total more than \$600	Describe what you contributed	contributed	value
	that total more than \$000		Continuated	
	Charity's Name	_		
	Number Street			
	Number Greet			
	City State Zip Code			
	Oity State Zip Code			
	List Certain Losses			
ι υ.	List Oci talli Losses			
	Yes. Fill in the details.  Describe the property you lost and how the loss occurred	Describe any insurance coverage for the loss Include the amount that insurance has paid. List	Date of your loss	Value of property lost
		pending insurance claims on line 33 of <i>Schedule A/B: Property.</i>		
		AVB. Floperty.		
	List Certain Payments or Transfers			
	out seeking bankruptcy or preparing a bankro			anyone you consulte
	out seeking bankruptcy or preparing a bankru lude any attorneys, bankruptcy petition preparers No			anyone you consulte
	out seeking bankruptcy or preparing a bankru lude any attomeys, bankruptcy petition preparers	uptcy petition?		anyone you consulte
	out seeking bankruptcy or preparing a bankru lude any attorneys, bankruptcy petition preparers No	uptcy petition?	ur bankruptcy.  Date payment or transfer	Amount of payment
	out seeking bankruptcy or preparing a bankru lude any attorneys, bankruptcy petition preparers No Yes. Fill in the details.	uptcy petition?  , or credit counseling agencies for services required in you  Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	but seeking bankruptcy or preparing a bankrulude any attorneys, bankruptcy petition preparers  No  Yes. Fill in the details.  Semrad Law Firm	uptcy petition?  i, or credit counseling agencies for services required in you  Description and value of any property	ur bankruptcy.  Date payment or transfer	Amount of
	but seeking bankruptcy or preparing a bankrulude any attorneys, bankruptcy petition preparers  No  Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid	uptcy petition?  , or credit counseling agencies for services required in you  Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	but seeking bankruptcy or preparing a bankrulude any attorneys, bankruptcy petition preparers  No  Yes. Fill in the details.  Semrad Law Firm  Person Who Was Paid  11101 S. Western Avenue	uptcy petition?  , or credit counseling agencies for services required in you  Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	but seeking bankruptcy or preparing a bankrulude any attorneys, bankruptcy petition preparers  No  Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid	uptcy petition?  , or credit counseling agencies for services required in you  Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	but seeking bankruptcy or preparing a bankrulude any attorneys, bankruptcy petition preparers  No  Yes. Fill in the details.  Semrad Law Firm  Person Who Was Paid  11101 S. Western Avenue	uptcy petition?  , or credit counseling agencies for services required in you  Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street	uptcy petition?  , or credit counseling agencies for services required in you  Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643	uptcy petition?  , or credit counseling agencies for services required in you  Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street	uptcy petition?  , or credit counseling agencies for services required in you  Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois 60643 City State Zip Code	uptcy petition?  , or credit counseling agencies for services required in you  Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643	uptcy petition?  , or credit counseling agencies for services required in you  Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois 60643 City State Zip Code  Email or website address	uptcy petition?  , or credit counseling agencies for services required in you  Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois 60643 City State Zip Code	uptcy petition?  , or credit counseling agencies for services required in you  Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois 60643 City State Zip Code  Email or website address	uptcy petition?  , or credit counseling agencies for services required in you  Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois 60643 City State Zip Code  Email or website address	uptcy petition?  , or credit counseling agencies for services required in you  Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois 60643 City State Zip Code Email or website address  Person Who Made the Payment, if Not You	uptcy petition?  , or credit counseling agencies for services required in you  Description and value of any property transferred	Date payment or transfer was made	Amount of payment
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	Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois 60643 City State Zip Code Email or website address  Person Who Made the Payment, if Not You  Person Who Was Paid	uptcy petition?  , or credit counseling agencies for services required in you  Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois 60643 City State Zip Code Email or website address  Person Who Made the Payment, if Not You  Person Who Was Paid  Number Street	uptcy petition?  , or credit counseling agencies for services required in you  Description and value of any property transferred	Date payment or transfer was made	Amount of payment
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	Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois 60643 City State Zip Code  Email or website address  Person Who Was Paid  Number Street  Chicago Illinois 60643 City State Zip Code  Chicago State Zip Code  Email or website address  Chicago Who Made the Payment, if Not You  Person Who Was Paid  Number Street	uptcy petition?  , or credit counseling agencies for services required in you  Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois 60643 City State Zip Code Email or website address  Person Who Made the Payment, if Not You  Person Who Was Paid  Number Street	uptcy petition?  , or credit counseling agencies for services required in you  Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois 60643 City State Zip Code  Email or website address  Person Who Was Paid  Number Street  Chicago Illinois 60643 City State Zip Code  Chicago State Zip Code  Email or website address  Chicago Who Made the Payment, if Not You  Person Who Was Paid  Number Street	uptcy petition?  , or credit counseling agencies for services required in you  Description and value of any property transferred	Date payment or transfer was made	Amount of payment

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Deb <sup>1</sup>	or 1				ase number <i>(if known)</i>		
		First Name	Middle Name	Last Name			
17.	help	nin 1 year before you filed by you deal with your credit not include any payment or t	tors or to make payme		alf pay or transfer	any property to a	nyone who promised to
	<b>✓</b>	No Yes. Fill in the details.					
				Description and value of any protransferred	perty	Date payment or transfer was made	Amount of payment
		Person Who Was Paid					
		Number Street					
		City State	Zip Code				
18.	the Incl	ordinary course of your bude both outright transfers a transfers that you have alreated.	usiness or financial af and transfers made as s	ecurity (such as the granting of a securi			
	Ц	Yes. Fill in the details.		Description and value of property transferred		/ property or ceived or debts p	Date aid transfer was made
		Person Who Received Tran	sfer				
		Number Street					
		City State Person's relationship to you	Zip Code u				
		Person Who Received Tran	sfer				
		Number Street					
		City State Person's relationship to you	Zip Code u				
19.	ben	nin 10 years before you file eficiary? ese are often called asset-pro		l you transfer any property to a self-s	ettled trust or sim	ilar device of whi	ch you are a
	<b>✓</b>	No Yes. Fill in the details.					
				Description and value of the pro	pperty transferred		Date transfer was made
		Name of trust					

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Debtor 1 Kaila Flemina Case number (if known) First Name Middle Name Last Name List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Part 8: 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Yes. Fill in the details. Last 4 digits of account Type of account or Date Last balance number instrument account was before closed, sold, closing or moved, or transfer transferred XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City Zip Code State XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other Zip Code 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? No Yes. Fill in the details. Who else had access to it? Describe the contents Do you still have it? No Name of Financial Institution Name Yes Number Street Number Street City State Zip Code State Zip Code 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Yes. Fill in the details. Do you still Who else had access to it? Describe the contents have it? No Name of Storage Facility Name Yes Number Street Number Street Citv State 7in Code

City

State

Zip Code

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Debtor 1 Kaila Flemina Case number (if known) Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. **✓** No Yes. Fill in the details. Where is the property? Describe the contents Value Owner's Name **NumberStreet** Number Street City State Zip Code State Zip Code **Give Details About Environmental Information** For the purpose of Part 10, the following definitions apply: ■ Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? Yes. Fill in the details. Governmental unit Date of Environmental law, if you know it notice Name of site Governmental unit Number Street **NumberStreet** City State Zip Code Zip Code State 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street **NumberStreet** City State Zip Code City State Zip Code

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Deb	tor 1			Malalla Nama		eming	Cas	se number (i	f known)	
		First Name		Middle Name	Las	st Name				
26.	Hav	e you been a part	y in any judici	al or administr	ative proce	eding under	any environme	ntal law? Ir	oclude settlements and ord	lers.
	V	No								
	Ħ	Yes. Fill in the det	tails.							
	_				Court or ag	ency		Nature	of the case	Status of the
										case
		Case title								Pending
					Court Name					
		Case number			NumberStree	et				On appeal
		0400								Concluded
					City	State	Zip Code			
Part	11:	Give Details Al	oout Your B	usiness or Co	nnections	to Any Bu	siness			
27.	Witl	nin 4 years before	you filed for b	oankruptcy, did	l you own a	business or	have any of the	following o	connections to any busines	is?
		A sole propri	etor or self-er	nployed in a tra	ade, profess	sion, or other	r activity, either	full-time or <sub>l</sub>	part-time	
		A member of	f a limited liab	ility company (L	LC) or limite	ed liability pa	artnership (LLP)			
		A partner in a	a partnership							
		An officer, di	rector, or mar	naging executiv	e of a corp	oration				
		An owner of	at least 5% of	the voting or e	quity securi	ties of a corp	poration			
		No None of the c		O- t- Dt 10						
	¥	No. None of the a				for ooolo k				
	Ш	Yes. Check all that	ат арріу ароу	e and illi in the						
					Descr	ribe the nati	ure of the busin	ess	Employer Identification include Social Security	
									EIN:	
		Business Name			_				LIIV.	
		Number Street			_				Dates business existed	
		Number Street			Name	of account	ant or bookkee	per	Datoo Duomood Oxiotou	
		City	State	Zip Code	_				From To	
					Dager	بادم عاد معان	ure of the busin		Employer Identification	number De net
					Descr	ribe the nati	are of the busine	ess	Employer Identification include Social Security	
									EIN:	
		Business Name								
		Number Street			_				Dates business existed	
					Name	of account	ant or bookkee	per		
		City	State	Zip Code	_				From To	
									Foods with 126 curs	
					Descr	ribe the nati	ure of the busin	ess	Employer Identification include Social Security	
									EIN:	
		Business Name			_				LIIV.	
		Number Ctreet			_				Dates business existed	
		Number Street			Name	of account	ant or bookkee	per	Dates Dusilless existed	
		City	State	Zip Code	_				From To	
		-							10	<u></u> -

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Debt	tor 1 Kaila			Fleming	Case number (if known)
	First Name		Middle Name	Last Name	
28.	Within 2 years creditors, or o		or bankruptcy, did ye	ou give a financial statemei	nt to anyone about your business? Include all financial institutions,
	Yes. Fill in	the details below.			
	_			Date issued	
				_	
	Name			MM/DD/YYYY	
	Number	Street		_	
	City	State	Zip Code	<del>_</del>	
Part	12: Sign Bel	OW			
tı	rue and correct	t. I understand tha	it making a false sta nes up to \$250,000,	tement, concealing proper	ents, and I declare under penalty of perjury that the answers are try, or obtaining money or property by fraud in connection with 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.
		Signature of Debto	0		Signature of Debtor 2
		J			Date
		Date 4/17/2018			
D	Did you attach a	dditional pages t	Your Statement of	Financial Affairs for Individ	uals Filing for Bankruptcy (Official Form 107)?
	<b>√</b> No				
֓֞֞֞֜֜֞֜֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֡֜֜֡֓֓֡֡	Yes				
D	Did you pay or a	gree to pay some	one who is not an at	torney to help you fill out b	ankruptcy forms?
I.	. No				
	Yes. Name o	f person			Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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B2030 (Form 2030) (12/15)

#### **UNITED STATES BANKRUPTCY COURT**

		Nortr	nern District of Illin	OIS	
In re	Kaila Fleming			Case No.	
	Debtor		<del>_</del>		(If known)
				Chapter	Chapter 13
DI	SCLOSURE OF	COMPEN	ISATION OF	ATTORNEY	FOR DEBTOR
comper	nsation paid to me within one	e year before the	filing of the petition in b	oankruptcy, or agreed	abovenamed debtor(s) and that d to be paid to me, for services he bankruptcy case is as follows:
For lega	al services, I have agreed to a	ccept			\$4,000.00
Prior to	the filing of this statement I	have received			\$300.00
Balance	e Due				\$3,700.00
2. The sou	urce of the compensation pai	d to me was:			
	Debtor	Ot	her (specify)		
3. The sou	urce of the compensation pai	d to me is:			
	<b>Debtor</b>	Ot	her (specify)		
	ave not agreed to share the a mbers and associates of my		compensation with any o	other person unless t	they are
└── me	ave agreed to share the above mbers or associates of my la people sharing in the compe	w firm. A copy of	the agreement, togethe		
5. In return	n for the above-disclosed fee	e, I have agreed to	o render legal service fo	r all aspects of the ba	ankruptcy case, including:
	Analysis of the debtor's fina bankruptcy;	ncial situation, ar	nd rendering advice to t	he debtor in determir	ning whether to file a petition in
b.	Preparation and filing of any	petition, schedu	lles, statements of affair	s and plan which ma	ay be required;
C.	Representation of the debto	r at the meeting o	of creditors and confirm	ation hearing, and ar	ny adjourned hearings thereof;
d.	Representation of the debto	r in adversary pro	oceedings and other cor	ntested bankruptcy m	natters;
6. By agre	ement with the debtor(s), the	above-disclosed	d fee does not include tl	ne following services	<b>:</b> :
			CERTIFICATION		
	nat the foregoing is a comple his bankruptcy proceedings.	ete statement of a	any agreement or arrang	ement for payment t	o me for representation of the
	4/17/2018			/s/ Alicia Haro	
	Date		S	ignature of Attorney	
				Semrad Law Firm	
				Name of law firm	

### UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

### RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

#### A. BEFORE THE CASE IS FILED

#### THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

#### THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule and explain how and when the attorney's fees and the trustee's fees are determined and paid.
- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.



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6. Advise the debtor of the need to maintain appropriate insurance.

#### B. AFTER THE CASE IS FILED

#### THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

#### THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.



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- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

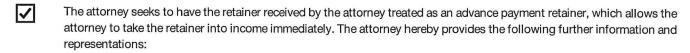
### C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3.If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to § 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.



#### D. RETAINERS AND PREVIOUS PAYMENTS

1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.



- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:

  Client understands that any funds that client is rendering to The Semrad Law Firm, LLC as part of the advance payment retainer shall immediately become the property of The Semrad Law Firm, LLC in exchange for a commitment by The Semrad Law Firm, LLC to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC and will be used for general expense of the firm. Client further understands that it is ordinarily the client's option to deposit funds with an attorney that shall remain client's property as security for future services. However, The Semrad Law Firm, LLC does not represent clients under such a security retainer because the preparation of a bankruptcy cases requires many disparate tasks and functions for the attorney and support staff; some of which require legal expertise while other may be only ministerial in nature. Client further understands that the benefit that client is receiving under the fee arrangement is the commitment of The Semrad Law Firm, LLC to perform any and all work reasonably necessary to represent client's interest absent any extraordinary circumstance.
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

#### E. CONDUCT AND DISCHARGE

- 1. Improper conduct by the attorney. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. *Improper conduct by the debtor*. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.



#### F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00
- 2. In addition, the debtor will pay the filing fee in the case and other expenses of \$371.76
- 3. Before signing this agreement, the attorney has received, \$300.00 toward the flat fee, leaving a balance due of \$3,700.00; and \$61.76 for expenses, leaving a balance due of \$4,071.76
- 4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

Date:	4/17/2018	
Signed:		
/s/ Kaila	Fleming Jume July	a o'a 'a 11a .
		/s/ Alicia Haro alicia Han
Debtor(s	5)	Attorney for Debtor(s)

Do not sign if the fee amounts at top of this page are blank.

#### THE SEMRAD LAW FIRM

Attorneys & Counselors at Law 20 S. Clark, 28th Floor Chicago, IL 60603 (312) 913-0625

Re: Agreement Regarding Priority Treatment of The Semrad Law Firm LLC's Fees and Expenses

Dear Client,

Thank you for choosing The Semrad Law Firm LLC (the Firm) to represent you in connection with your Chapter 13 bankruptcy case. In addition to the terms contained in the Court Approved Retention Agreement (CARA) it is our policy to confirm in writing how and when the Firm's fees and expenses will be paid. If there are any terms contained in this document that are in conflict with CARA, those terms are void.

Aside from any initial retainer that you pay the Firm, you will be required to pay the Firm's fees and expenses through the Chapter 13 plan after it is approved by the Bankruptcy Court. Each month, you will pay the Trustee the amount stated in your Chapter 13 plan. The Trustee will then disburse that money out according to the provisions of your plan to the Firm and other creditors.

The model Chapter 13 plan gives fourth priority to attorneys' fees, after the Trustee's fees, current mortgage payments, and payments to secured creditors listed in Sections 3.1, 3.2, or 3.3 of the model plan(for example, payments due to lenders on a loan to purchase a car, furniture, appliance or other item of personal property). The Firm intends to alter this priority scheme by modifying the model Chapter 13 plan to provide for payment of the Firm's attorney's fees and costs before any payments are made to your other creditors. That means that the money you send to the Trustee each month will first be paid to the Firm and not to pay the claims of your other creditors until the Firm's fees and expenses are paid in full. Such claims of other creditors include your car note, other financed personal property, parking tickets, taxes, and any claims of other creditors that may be included in your plan.

Aside from the Firm's commitment to perform any and all work reasonably necessary to represent you in this bankruptcy case without requiring you to pay a substantial amount of the fees and expenses up front, there is no benefit to you from this priority treatment of the Firm's fees and expenses. Furthermore, this arrangement presents certain risks. In the event that your case is dismissed before completion of the plan or if you decide to convert your case to a case under Chapter 7, it is likely that the Firm's attorneys' fees will have been paid while little of your other debts are paid.

In addition, there is the possibility that a creditor or the Trustee may object to the Firm being paid under this altered priority arrangement. In the event of such an objection, the Firm may lower that amount that the Firm will receive each month and increase the monthly payment to such creditor in order to resolve the objection. However, creditors may seek to recover

X.

#### THE SEMRAD LAW FIRM

Attorneys & Counselors at Law 20 S. Clark, 28<sup>th</sup> Floor Chicago, IL 60603 (312) 913-0625

additional attorneys' fees as a result of any such objection and you may be required to pay the creditors' additional attorneys' fees over time through the Chapter 13 Plan.

If you do not wish to pay the Firm's attorneys' fees and expenses ahead of your creditors as set forth above, you have the following options:

- a. You can elect to pay the Firm an upfront retainer of \$1,500 prior to filing your case and elect for the plan to pay your car note (and/or other claims secured by personal property) and mortgage arrears in equal set monthly payments along with the Firm's fees and expenses; or
- b. You can seek representation by another firm under a different payment arrangement.

Please carefully review this letter. If the terms are not consistent with your understanding of our engagement in any respect or if you have any questions concerning the same, please notify us promptly. You can also seek advice from other counsel regarding your rights under this arrangement. Firm policy and a prior court order require that we receive confirmation of your acceptance of these terms in the form of your signature at the bottom of this letter. Please return the signed copy to the Firm as soon as possible.

Very Truly Yours,

THE SEMRAD LAW FIRM LLC

One of its Attorneys

Accepted:

with fully

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

#### **Chapter 7: Liquidation**

	\$245	filing fee
	\$75	administrative fee
+	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form - the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form - sometimes called the *Means Test* - deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### Chapter 11: Reorganization

	\$1,167	filing fee
+	\$550	administrative fee
	\$1.717	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.

### Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury either orally or in writing in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

# Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://www.justice.gov/ust/eo/hapcpa/ccde/cc">http://www.justice.gov/ust/eo/hapcpa/ccde/cc</a> approved.html

In Alabama and North Carolina, go to:
<a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit</a>
<a href="mailto:20AndDebtCounselors.aspx">20AndDebtCounselors.aspx</a>

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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#### **UNITED STATES BANKRUPTCY COURT**

**Northern District of Illinois** 

In re:	Fleming, Kaila	Case No	
	Debtor(s)		
		Chapter.	Chapter13
	VERIF	ICATION OF CREDITOR MAT	RIX
Th knowledge	•	ify that the attached list of creditors is tru	ue and correct to the best of their
Date:	4/17/2018	/s/ Fleming, Kaila	1
		Fleming, Kaila <i>Signature of Deb</i>	tor

Exeter Finance LLC PO BOX 166097 IRVING, TX, 75016

IL COLL UNLT BOX 305 PEKIN, IL, 61554

EDFINANCIAL SERVICES L 120 N SEVEN OAKS DR KNOXVILLE, TN, 37922

ENHANCED RECOVERY CO L 8014 BAYBERRY RD JACKSONVILLE, FL, 32256

City of Chicago 33589 Treasury Center Chicago, IL, 60694

HARRIS & HARRIS LTD 222 Merchandise Mart Plaza, Suite 1900 Chicago, IL, 60654

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Debtor 1 Kaila First Name	Flemin Middle Name Last Na		er (if known)		
THE PRODUCTION AND ADMINISTRATION	estions for Reporting Purposes	me			
16. What kind of debts do you have?	16a. Are your debts primarily consummer incurred by an individual primarily No. Go to line 16b.  Yes. Go to line 17.  16b. Are your debts primarily busi	narily for a personal, family, or ness debts? Business debts the operation	are debts that you incurred to obtain on of the business or investment.		
17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	expenses are paid that funds  No.		empt property is excluded and administrative unsecured creditors?		
18. How many creditors do you estimate that you owe?	✓ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999	1,000-5,000 5,001-10,000 10,001-25,000	25,001-50,000 50,001-100,000 More than 100,000		
19. How much do you estimate your assets to be worth?		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 mill \$100,000,001-\$500 m	on \$1,000,000,001-\$10 billion ion \$10,000,000,001-\$50 billion		
20. How much do you estimate your liabilities to be?		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 m	on \$1,000,000,001-\$10 billion ion \$10,000,000,001-\$50 billion		
Part 7: Sign Below					
For you	I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.  If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.  If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).  I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.  I understand making a false statement, concealing property, or obtaining money or property by fraud in				
	connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.				
	/s/ Kaila Fleming Wall Signature of Debtor 1	ffeller Sig	nature of Debtor 2		
	Executed on 4/17/2018 MM / DD / YY		ecuted on		

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Fill in this inform	mation to identify your c	ase:	<b>经验的</b> 自己的自然证明		
Debtor 1	Kaila First Name	Middle Name	Fleming Last Name		
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name		
	ankruptcy Court for the:		District of Illinois		
Case number	-		(State)	_	
Official	Form 106De	eC			Check if this is an amended filing
Declarat	ion About an	Individual Deb	tor's Schedule	S	12/1
If two married	people are filing togeth	er, both are equally respo	onsible for supplying corre	ct information.	
money or prope	erty by fraud in connect 1341, 1519, and 3571.			laking a false statement, concea \$250,000, or imprisonment for u	
Did you pa	ay or agree to pay some	eone who is NOT an attor	ney to help you fill out ban	kruptcy forms?	
✓ No					
Yes.	Name of person		Attach Bankruptcy Signature (Official I	Petition Preparer's Notice, Declaration Form 119).	on, and
that they	nalty of perjury, I declar are true and correct.	re that I have read the su	mmary and schedules filed	d with this declaration and	

Signature of Debtor 2

MM/DD/YYYY

Date

Signature of Debtor 1

Date 4/17/2018 MM/DD/YYYY

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Debtor <sup>2</sup>			Fleming	Case number (if known)
	First Name	Middle Name	Last Name	
	thin 2 years before you editors, or other parties		you give a financial state	ment to anyone about your business? Include all financial institutions,
	No Yes. Fill in the details l	pelow.		
	-		Date issued	
	Name		MM/DD/YYYY	_
	Number Street		<u> </u>	
	0	7.01	_	
	City S	tate Zip Code		
Part 12	Sign Below			
	ankruptcy case can resu	alt in fines up to \$250,000 a Fleming		perty, or obtaining money or property by fraud in connection with to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.  Signature of Debtor 2
				Date
	Date 4/17,	/2018		54.0
Did	you attach additional p	ages to Your Statement	of Financial Affairs for Ind	ividuals Filing for Bankruptcy (Official Form 107)?
V	No			
	Yes			
Did	you pay or agree to pay	someone who is not an	attorney to help you fill o	ut bankruptcy forms?
V	No			
	Yes. Name of person			Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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### UNITED STATES BANKRUPTCY COURT Northern District of Illinois

In re:	Debtor(s)	Case No	
		Chapter.	Chapter13
	VERI	FICATION OF CREDITOR MATE	RIX
Th knowledge		erify that the attached list of creditors is tru	e and correct to the best of their
Date:	4/17/2018	/s/ Fleming, Kaila Fleming, Kaila <i>Signature of Debt</i> e	wine Johns

### Case 18-11139 Doc 1 Filed 04/17/18 Entered 04/17/18 13:57:51 Desc Main Document Page 66 of 66

Debto	r 1 Kaila First Name	Middle Name	Fleming Last Name	Case number (if known)		
16.	Calculate the median	n family income that applies to y	you. Follow these steps:			
	16a. Fill in the state in	which you live.	Illinois			
	16b. Fill in the number	of people in your household.	1			
		family income for your state and s	MITTERS		\$52,410.00	
	household using the link spe	ecified in the separate instructions f		a list of applicable median income amounts, go online ay also be available at the bankruptcy clerk's office.		
17.	How do the lines con	·				
				form, check box 1, <i>Disposable income is not determined on of Disposable Income</i> (Official Form 122C-2).		
	U.S.C. § 132		Calculation of Disposa	ck box 2, Disposable income is determined under 11 able Income (Official Form 122C-2). On line 39 of that		
Part	Calculate Your	Commitment Period Under	11 U.S.C. §1325(b)	(4)		
18.	Copy your total avera	age monthly income from line 1	1.		\$0.00	
19.				onot filing with you, and you contend that calculating the our spouse's income, copy the amount from line 13.		
	19a. If the marital adju	stment does not apply, fill in 0 on	line 19a.		- <u>\$0.00</u>	
	19b. Subtract line 19	a from line 18.			\$0.00	
20.	Calculate your curre	nt monthly income for the year.	Follow these steps:			
	20a. Copy line 19b.				\$0.00	
	Multiply by 12 (th	ne number of months in a year).			x 12	
	20b. The result is your	current monthly income for the ye	ear for this part of the for	m.	\$0.00	
	20c. Copy the median	family income for your state and s	size of household from l	ine 16c.	\$52,410.00	
21.	How do the lines con	npare?				
		an line 20c. Unless otherwise ordered is 3 years. Go to Part 4.	ered by the court, on the	e top of page 1 of this form, check box 3, The		
	Line 20b is more than or equal to line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 4, The commitment period is 5 years. Go to Part 4.					
Part	4: Sign Below					
	By signing here, I	declare under penalty of perjury th	at the information on thi	is statement and in any attachments is true and correct.		
		1 1	1.			
	🗶 /s/ Kaila Fl	1100000 7/100	ing x			
	Signature of Debtor 1 Signature of Debtor 2					
	Date 4/17/2			Date MM/DD/YYYY		
		a, do NOT fill out or file Form 122 b, fill out Form 122C-2 and file it v		9 of that form, copy your current monthly income from lir	ne 14	
	above.					